Dennison's Absorbent Cotton

Painstaking Physicians and Surgeons, please send to Dennison Manufacturing Co., Boston, for Sample.

VOL. II. NO. 9. SEPTEMBER, 1885. $2.50 PER YEAR.

THE MEDICAL ANALECTIC

A

MONTHLY EPITOME OF PROGRESS IN ALL DIVISIONS OF MEDICO-CHIRURGICAL PRACTICE

EDITED BY

WALTER S. WELLS, M.D.

FORMERLY EDITOR OF

"QUARTERLY EPITOME OF PRACTICAL MEDICINE AND SURGERY,"

AND

"EPITOME OF BRAITHWAITE'S RETROSPECT," ETC.

SPECIMEN

CONTENTS

	PAGE		PAGE
ZYMOTIC	385	DERMAL	405
NEUROTIC	387	TOXIC AND HYGIENIC	408
RESPIRATORY	389	PARTURIENT	411
CIRCULATORY	391	GYNECIC	414
ALIMENTARY	394	PEDIATRIC	416
URO-GENITAL	396	SURGICAL	418
VENEREAL	399	MISCELLANEA	425
OPHTHALMIC	401	BOOK NOTICES	432
AURAL	403	NEW BOOKS	

☞ SEE PREMIUM LIST IN ADVERTISING PAGES. ☜

NEW YORK

G. P. PUTNAM'S SONS

27 & 29 WEST TWENTY-THIRD ST.

LONDON: 25 HENRIETTA STREET, COVENT GARDEN

Entered at the Post-Office, New York City, as Second-Class mail matter

COPYRIGHT, 1885, BY G. P. PUTNAM'S SONS.

LACTOPEPTINE The only perfect Digestion Agent ever produced. See inside page.

THE HIGHEST AWARD,

GOLD MEDAL,

Has been granted to

MELLIN'S FOOD

FOR INFANTS AND INVALIDS,

At the World's Exposition, New Orleans,

1885.

Doliber, Goodale & Co.,

40, 41, 42 & 43 Central Wharf, BOSTON, MASS.

A Sample of MELLIN'S FOOD, sufficient for trial, will be sent free to any Physician desiring it.

COLDEN'S Liquid Beef Tonic.

Established 15 Years.
OBSERVE the NAME.
Beware of Imitations.

ORIGINAL LABEL:
"Colden's Liebig's Liquid Extract of Beef and Tonic Invigorator."
(Originated and first Prepared by the Liebig Meat Extract Co. London, Eng.)

An Invaluable Aid in Medical Practice.

Differs Essentially from all other Beef Tonics.

COLDEN'S Liquid Beef Tonic is endorsed by scores of physicians, who are growing to realize more and more its importance in repairing, in accordance with the principles of dietetics, the **waste which disease entails.** It consists of the extract of Beef (by Baron Liebig's process) spirit rendered non-injurious to the most delicate stomach by extraction of the Fusel Oil, soluble Citrate of Iron, Cinchona, Gentian and other bitter tonics. An official analysis of this preparation by the eminent Chemist, ARTHUR HILL HASSALL, M. D., F. R. S., and an endorsement by the late SIR ERASMUS WILSON, F. R. S., is printed on the label of each bottle.

As a **nutrient,** and a **reliable tonic** in all cases of debility and weakness, Malarial Fever, Anæmia, Chlorosis, Incipient Consumption, etc., it is the best preparation ever used. It acts directly on the sentient Gastric Nerves, stimulating the follicles to secretion, and gives to weakened individuals that first prerequisite to improvement—an appetite. It strengthens the nervous system when unstrung by disease, and has been employed with remarkable success as a remedy for Drunkenness and the Opium Habit.

Its Range of Action Embraces all Cases of Debility.

In order that physicians may form some idea of the nature of its ingredients, I will upon application in person, or by letter (enclosing a card), send a sample bottle of COLDEN'S LIQUID BEEF TONIC to any physician in regular standing, in the United States. Please ask your Dispensing Druggist (if he has not already a supply) to order it. In prescribing this preparation, physicians should be particular to mention "COLDEN'S"—*viz.:* **"*Ext. carnis, fl. comp. (Colden's.)*"** It is put up in pint bottles, and can be had of Wholesale and Retail Druggists generally throughout the United States.

C. N. CRITTENTON, Sole Agent, 115 Fulton St. New-York.

GLENN'S Sulphur Soap.

ALL physicians know that ***skin diseases*** are more or less constitutional, or dependent upon some specific poison in the blood, which if eradicated by internal treatment needs something to remove its appearance from the surface. Experience has proved that the best possible aid in the accomplishment of this end is obtained by the use of ***Sulphur in soap.*** GLENN'S SULPHUR SOAP is the best combination of its kind, and the one now generally used. It is for sale by all Druggists, at **25** cents a cake, or 3 cakes for **60** cents.

CONSTANTINE'S PINE TAR SOAP

Has been on trial among physicians for very many years as a toilet Soap and Healing Agent, and its superior virtues have been unanimously conceded **in all cases where the use of tar is indicated.** Unsolicited expressions of its excellence have been received from the Medical Faculty generally. IT IS THE BEST TAR SOAP MADE. None genuine unless stamped "A. Constantine's Persian Healing Pine-Tar Soap." For sale by all Druggists.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

MALTOPEPSINE.

TO THE MEDICAL PROFESSION.

The experience we have had of many years as Manufacturing Pharmaceutists has brought us more or less in regular contact with the medical profession and its wants, has afforded us advantages for experiment, study, and practical development, which have engaged our attention in perfecting new and more efficacious agents for physicians' use, in the control, subjection, treatment, and cure of diseases, and we trust the Medical Profession will feel assured that in no instance shall we solicit their attention except we have some production worthy of their highest consideration and confidence.

We would respectfully call your attention to our new preparation of Maltopepsine which we regard as a very important Remedial Agent for Indigestion, Constipation, Dyspepsia, Vomiting in Pregnancy, Nervousness, Loss of Appetite, all forms of Gastric Derangement, Atonic Diarrhœa, and Indigestive Diarrhœa of Children. This valuable remedy contains the digestive and nutritive properties of the grain unimpaired, combined with the active agents of digestion, viz: Diastase, Pepsine, Lactic Acid, Phosphoric Acid, Powdered Firwein, and the Bromide and Chloride of Aluminium and Sugar of Milk.

Dose.—From 5 to 15 grains after each meal.

MALTOPEPSINE will be found greatly superior to all other remedies, for Dyspepsia and kindred diseases. Can be taken with sugar, in wine or water if preferred.

The measure over the cork holds ten grains when filled, *or one average dose.*

FORMULA FOR MALTOPEPSINE.

Sugar of Milk	35 ozs.	Lactic Acid	8 fl. drams.
Nutritives of the grain	10 "	Hydrochloric Acid	5 fl. "
Dioscorein	10 "	Phosphoric Acid	3 fl. "
Pepsine	16 "	Aluminium	3 fl. "
Diastase	6 drams.		

PREPARED ONLY BY

TILDEN & CO.,

New Lebanon, N. Y., and 24 Liberty Street, New York City.

☞ In corresponding with Advertisers, please be sure and mention The Medical Analectic.

PEACOCK'S BROMIDES

—(CHEMICALLY PURE.)—

Each fluid drachm contains fifteen grains of the Combined C. P. Bromides of Potassium, Sodium, Calcium, Ammonium and Lithium.

USES.—Epilepsy, Spinal and Uterine Congestions, Congestive Headache, Cerebral Apoplexy, Enuresis, Dentition, Mania, Meningitis, Eclampsia, etc.

DOSE.—One to two Fluid Drachms, in water, three times a day.

PEACOCK'S FUCUS MARINA

—(ANTIDOTE TO MALARIA.)—

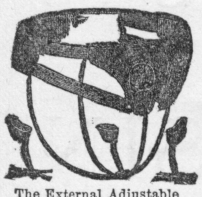
DIRECTIONS.—To Eradicate the Malaria from the system, One Teaspoonful in water, three times a day. For Intermittent, Remittent, and other Fevers, Five to Twenty Drops, every two or three hours. As a prophylactic against Malaria, One Teaspoonful twice a day. PEACOCK CHEMICAL CO., St. Louis.

J. W. DAWSON'S
EXTERNAL ADJUSTABLE STEM UTERINE SUPPORTER

And Improved Abdominal Supporter,

FOR MECHANICAL TREATMENT

Of Prolapsus, Retroversion, Anteversion and the *Flexions.*



The External Adjustable Stem Elastic Supporter.

The External Adjustable Stem Supporter, applied for Prolapsus.

The Abdominal Supporter consists of a broad morocco belt, with elastic straps, to buckle around the hips, and concave front, which has the straps attached to the lower front edge. By tightening these straps a "*lift-up pressure*" is obtained. You can readily see that this is a great improvement. The Uterine Supporter is made of pure black rubber, with a very high degree of polish, which will not become changed by contact with the uterine and vaginal discharges. The cup has a thick rolled edge, like a ring, with deep sloping sides like a cup, perfectly adapted to the form of the cervix, no bottom to press, chafe or abrade the os uteri. The stem is adjustable, one inch in length after it is inserted, by a small thumb-screw at the exterior of the stem, making it easy to adjust, as shown above, a principle possessed by none other, patented June 25, 1878. I furnish non-adjustable stems, if ordered, any length.

The Elastic Supporter. The cup and stem is suspended from the belt by two soft elastic rubber tubes, which are fastened to the front of the belt by simple loops, pass down through the base of the stem and up to the back of the belt.

The Spring Supporter. The spring or point of attachment to the belt is so pliable as to permit the organ to rise and fall with each respiration, or during the act of coughing, sneezing, etc. The wire supporting frame is solid coin silver, stamped coin, and warranted to be such. It is attached to the stem by a hinge joint, under the base, which also prevents the cup from pressing back against the rectum.

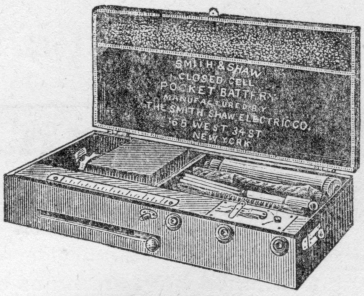
For extreme versions and flexions, I make a special large cup, with extended lip, open bottom, for enlargement, ulceration, retroversion, anteversion, or any unusual flexion of the womb. **Prolapsus** is by far the most common of *uterine displacements*, and as usually managed, the most annoying and obstinate to cure. In cases where the organ lies very low, requiring an uncommonly short stem at first by means of the external adjustable extension stem. elevation of the womb is made so gradual (by the patient) allowing the ligaments time to contract, and this elevation will progress until it has regained its normal position. The retroversion and anteversion cups, it will be seen, are peculiarly adapted to the anatomy of these displacements. I make three sizes of belts, measuring respectively as follows:

Small size, 24 to 28 inches; Medium size, 28 to 36 inches; and Large size, 36 to 48 inches. The medium size will suit the majority of cases, and is sent where no instructions are given. The medium cup for Prolapsus, as shown above, is 1¼ inches in diameter, with stem 2½ inches long, adjustable to 3½ inches. This will also suit the majority of cases. The small cup is a little shorter stem. Cups for retroversion or anteversion are the same in size, but have an extended lip on back or front, as shown in the cuts.

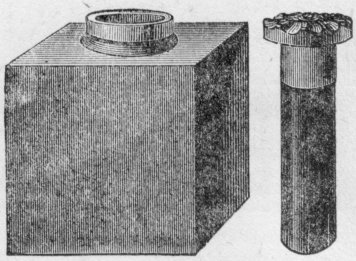
	My Reduced Price to Physicians.	Non-Adjustable Stem.
Abdominal Supporter, elastic, with Cup (or Ring), Adjustable Stem.....	$4.50 each.....	$3.00 each.
" " Cup (or Ring), Adjustable Stem and Silver Spring .	6.50 "	5.00 "

Instruments sent by mail at my risk, on receipt of price; or I will send by express C. O. D. and collect return express on the money. Remittances may be made by mail, registered letter, money order, draft, or express, whichever is the most convenient. Give full name, post-office, county and state. Send for circulars. For further information in regard to the instrument, address

J. W. DAWSON, 387 West Taylor Street, Chicago, Ill.



SMITH & SHAW CLOSED CELL Pocket Battery.



Gives Three Currents. **Not having a Screw-top it is positively Acid-Tight.**

We have succeeded in producing a battery calculated to meet the want of professionalist and layman alike, and with the greatest confidence submit it to public inspection, criticism, and judgment.

It has a current so *mild* that it cannot be felt excepting by the most sensitive, and yet can be gradually increased to one so *strong* as to fully meet the requirement of any medical demand.

The disagreeable jerk, or electrical "thump," so characteristic of many Batteries, is not found in these, but a current that is nowhere excelled for its *fineness*, *smoothness*, and *agreeableness*.

As the cell will give ten to twelve hours' work, and can be used from day to day, until that much electric energy is consumed, upon the *same charge of Bi-sulphate Mercury* used to get one hour's work out of a once popular Electric Machine, there is no question as to the claim of *economical working*.

The *pole-cords* are attached on the *outside of the box*; the *Graduator* is *outside*, most handily placed and cannot fall out; the *Cut-off* for "making" and "breaking" circuit is *also outside*.

The boxes are Mahogany.

The *Induction Coil*, of best copper wire, carefully wound by skilful hands, and properly proportioned to produce the best effect.

The *Cells* are of hard rubber with carbon chamber, charged with a solution of *Bi-sulphate Mercury*, into which a zinc rod is immersed. The zinc rod has a rubber head fitting tightly into the neck of the cell, making the whole *air-tight* and *acid-tight*.

The *Rheotome* is made on an improved plan, and *is not liable to get out of order*.

The Pole-cords, Hand-Electrodes, Wire brush, and Olive and Spherical Electrodes furnished are of the best material and workmanship, and cost extra with other batteries.

No. 1.—1 CELL, 6 inches long, 3½ inches wide, 1½ inches high $7 50
No. 2.—2 CELLS, 7½ " " 3⅝ " " 1½ " " 10 00

THE ELECTRIC DUMB BELLS.

This is the only Electric Machine where muscular exercise and electric quickening can go on at the same time.

It is also a **perfect** and **complete Electro-Magnetic Battery** for family use Beautifully made of mahogany or ebony. All parts nickel-plated, sealed cell, and in all respects a novel, useful, and most desirable apparatus.

THE SMITH & SHAW ELECTRIC CO.,

SEND FOR CIRCULARS. **168 W. 34th St., New York City.**

CARL L. JENSEN'S CRYSTAL PEPSIN

Has achieved Unparalleled Fame in the following Treatments:

1. In most varieties of Dyspepsia.
2. In all forms of Debilities.
3. As a Solvent for Muco-Purulent matter.
4. Injected as a Solvent for Coagulated blood in the bladder.
5. As a Solvent for Diphtheritic patches and membranes, using a hot solution not above 130° Fahr. as a spray every fifteen minutes.
6. Mixed with Food for Rectal Alimentation.
7. Injected into cavities through an Aspirator Needle for the solution and removal of diseased accumulations.
8. For Predigestion of Milk; to each pint of warm milk use a few grains of the Pepsin previously dissolved in a little lemon-juice; decidedly superior to and more economical than Pancreatine.

Formula for Wine of Pepsin: Jensen's Pepsin, 192 grs.; Sherry Wine, fl. ℥ viss.; Glycerine, pure, ℥ iss; Tartaric Acid, 5 grs. SIG.—Fl. ℥ after meals. This is three grains of the Pepsin to each teaspoonful.

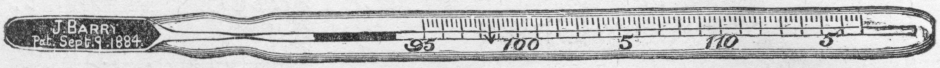
CARL L. JENSEN,

2039 Green Street - - - PHILADELPHIA, PA.

In corresponding with Advertisers, please be sure and mention **The Medical Analectic.**

BARRY'S
CLINICAL THERMOMETER.

a.



b.

Patented Sept. 9, 1884.

This instrument embodies the following improvements (reference being had to the annexed cut). The tube is of a similar shape, through which construction it is not liable to roll, and breakage is prevented. Besides, being broad and flat, the lines and figures are made more prominent, and are readily seen, both when the instrument is held vertically or when it lies flat on a table. It is a fact known to all responsible dealers, Thermometers that are made and finished new lose one degree of accuracy in one year. This is due to the natural contraction of glass before it assumes an absolutely homogeneous state. I will fully guarantee the quality of these Thermometers, as they are **well seasoned before they are made up.** Should you at any time desire this instrument (or any instrument of my manufacture) tested I will do this, if sent to me direct or through those from whom you receive them. In either case I will forward information as to their varied condition. Your attention is especially called to the above cut: *a* indicates the contracted part of the tube, and *b* an enlarged cross-section thereof.

The patent covering this instrument bears date Sept. 9, 1884, covering broadly all Clinical Thermometers having a flat back, a face semicircular or nearly so, containing the graduations, etc., as therein described.

NOTICE.—I caution the public to beware of imitations, whether made of plain, colored, or twisted glass. **Please note if my name and date of Patent be on each instrument.**

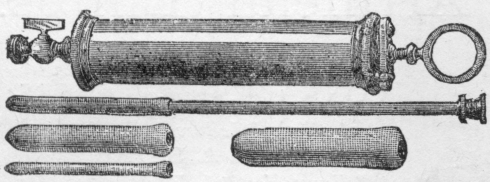
Price, $15 per doz. A sample sent to any address on receipt of $1.25. Also my Ordinary Clinical Thermometers, VERY OLD, **with Certificates of Correction** from Yale College.

A sample sent to any address for $2.00.

JOHN BARRY,
PATENTEE AND MANUFACTURER.

62 Fulton Street, New York.

DR. MOLESWORTH'S CLIMAX DILATOR.



Tubes, $\frac{1}{8}$, $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$ inch in diameter. Dilating as high as four inches in diameter.

For Dilating the Os and Cervix Uteri, Urethra, Cervix Cystici, Sinus, Strictures of the Œsophagus, Vagina, Anus, etc., and as a general Tampon.

Both Pneumatic and Dieulafoy. Aspirator attachments complete to fit Dr. Molesworth's Climax Dilator.

☞ Send for Descriptive Circulars and Price Lists, and mention THE MEDICAL ANALECTIC. ☜

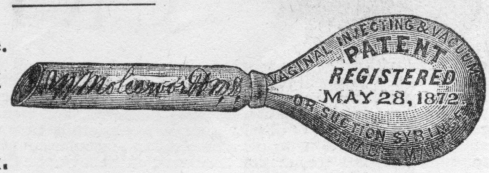
Intra-Uterine, Injecting, and Vacuum Syringe, Price, $6.00.

DR. MOLESWORTH'S
Vaginal Injecting and Suction Syringe.

Is Indorsed and Recommended by more than Nine Tenths of all the Physicians who have examined it. Price, $2.00.

NO WOMAN CAN AFFORD TO BE WITHOUT IT.

DR. MOLESWORTH & CO.,
69 Gold St. - - - - New York.



OPIUM HABIT.

Dr. F. M. Hamlin will receive for private treatment all forms of Opium Habit. Patients will receive personal attention and every aid which medical skill and several years' special experience can give to effect a safe and easy cure. Time required, two to four weeks. Strictest privacy observed when required.

Address for particulars, F. M. HAMLIN, M.D., The Retreat, 9 William St., Auburn, N.Y.

A MANUAL OF
PRESCRIPTION WRITING.

BY MATTHEW D. MANN, AM., M.D.

With full explanations of the methods of correctly writing prescriptions. A Table of Doses expressed in both apothecaries' and metric systems, etc., etc.

FOURTH EDITION, *revised, enlarged, and corrected according to the U. S. Pharmacopœia of* 1880.

16mo, bound in flexible brown cloth cover, $1.00.

G. P. PUTNAM'S SONS, 27 and 29 W. 23d St., New York.

☞ In corresponding with Advertisers, please be sure and mention The Medical Analectic.

THE WILSON PATENT

Adjustable Iron Operating Chair

FOR PHYSICIANS.

No Office Complete Without It.

Most convenient for SURGICAL OPERATIONS.
Also INVALIDS' RECLINING AND SELF-PROPELLING

WHEEL CHAIRS.

Send for Circular to the Manufacturer,

MATHIAS KLEIN,

87 and 89 W. Van Buren St., Chicago, Ill.

THE

Inebriates' Home,

FORT HAMILTON, N.Y.

INCORPORATED 1866.

A Hospital for the Treatment of ALCOHOLISM and the OPIUM HABIT.

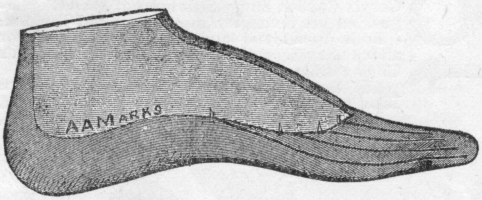
President: Hon. G. G. HERMAN.
Consulting Physician: L. D. MASON, M.D.
Medical Sup't: JAMES A. BLANCHARD, M.D.

The building is situated in a park of twenty-six acres, overlooking and commanding fine views of the Narrows, and the upper and lower bay of New York Harbor.

The accommodations, table, attendance, and nursing are of the best character, and suited to first-class patients.

For manner and terms of admission, apply to the Superintendent, at the Institution, Fort Hamilton (L. I.), N. Y.

Marks' Patent Artificial Limbs.



LECTURE.

CONVALESCENT CASES.

A Clinical Lecture by Professor
LEWIS A. SAYRE,
at Bellevue Hospital, February 14, 1877.

CASE 6.—Mary Cashen. Here is a little girl I feel proud to show you. Look at that smiling face, compared with what it was when she came here several months ago. The operation was performed three months ago. You will recollect this girl came here with chronic disease of the knee-joint, which she had had ever since she was seven months old. From the age of seven months on, she remained with her knee in a state of chronic inflammation. It was plastered, and issued, and fired, and iodined, and she took internal remedies all the time, until within a few weeks ot the time whan she came here, but she never had extension and counter-extension, to overcome reflex muscular contraction. The muscles contracted in such a way as to produce a complete luxation backward of the leg upon the thigh, so that the head of the tibia lay in the intercondylic notch.

You will recollect that the leg and foot were models of symmetry and beauty, never having been stepped upon, or never having worn a shoe. The disease had so thoroughly involved the joint, that an exsection alone could not save the limb. If a resection had been performed, the leg would have been too short to walk upon, and on that account I decided to perform an amputation upon the knee-joint, leaving the patella to form the end of the stump.

Mr. A. A. MARKS, the Instrument maker, has been kind enough to present to this little girl an artificial leg, and I feel under great obligations to him. He makes, as I think, **altogether the Best Artificial Leg I have ever seen,** simply because of its durability and simplicity. The foot has no joint at the ankle, and this is where the great advantage comes in. The core of the foot is a small solid piece of wood in the shape of a foot, only much smaller. This core is covered with a thick layer of sponge rubber, so that from the instep to the toes, and back to the heel, the foot is simply rubber. The elasticity of the toes and heel compensates for the absence of the ankle-joint, and in walking there is none of the jarring, dot-and-go-one walk so characteristic of the jointed leg. With this rubber foot she can walk with the **Stealthy, Noiseless Tread of a Cat.** The spring and elasticity of the foot is a **positive** comfort to the patient.

Illustrated Pamphlet of 160 pages, and New System of Measurement, Sent Free. Address,

A. A. MARKS, 701 BROADWAY,

NEW YORK CITY.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

DUFFY'S PURE Malt Whiskey

Pure, Unadulterated, and **absolutely Free** from **Fusel Oil,** is the only Whiskey that can be safely recommended by the **Medical Fraternity** to their patients; it has been endorsed by eminent Physicians and Chemists in all parts of the country. In cases of Pneumonia, Diphtheria, Consumption, Malaria, Hemorrhages, all Pulmonary Complaints, low Fevers, **Dyspepsia** and **Indigestion,** it is highly recommended. In diseases where any stimulant is required, it is a valuable aid on account of its **absolute purity.** We are the only concern in the United States who are bottling and selling to the **Medical** Profession an absolutely **Pure Malt Whiskey.**

TESTIMONIALS.

Gentlemen.—I take pleasure in testifying that I have made an analysis of your Pure Malt Whiskey, which gave a very gratifying result. Your Malt Whiskey is entirely free from fusel oil or any of those similarly obnoxious alcohols which are so often found in whiskeys. Therefore it can be recommended as extremely fit for medical purposes.

DR. M. E. ARENDT,
Analytical and Consulting Chemist, Buffalo, N. Y.

STAPLETON, RICHMOND CO., N. Y.,
April 23, 1884.

Gentlemen.—When I prescribe an alcoholic stimulant to sick and convalescent people, I order your famous Malt Whiskey in preference to any other liquor, for the reason that I know it to be wholesome, clean, and unadulterated. I confidently recommend it to the Medical Profession at large, satisfied that it will meet with the approval of the profession in every particular. Yours truly,

JAMES J. O'DEA, M.D.

RICHMOND, VA., Oct. 21, 1884.

Gentlemen.—Your sample of Whiskey came duly to hand, and its contents tested. I shall prescribe it whenever I consider that stimulant is required.

J. N. RICHARDS, M.D., 7 N. 6th St.

Gentlemen.—Since the introduction of your Whiskey in our city, I use no other, for the reason that I know it to be pure and unadulterated. What I employ with so much success in my own practice I can, without hesitation, recommend.

JAMES E. WHITEFORD, M.D.,
195 *Aisquith St., Baltimore, Md.*

BALTIMORE, MD., Oct. 2, 1884.

Gentlemen.—I have had a careful analysis made of a sample of your Malt Whiskey, as you requested, and find it remarkably free from fusel oil and other objectionable materials so often found in the whiskeys of the present day.

Its flavor is quite pleasant and agreeable to both taste and smell, and it is, therefore, well suited to all cases that require the use of an alcoholic stimulant.

HARVEY L. BYRD, M.D.,
President of the Faculty, and Professor of the Baltimore Medical College.

ROCHESTER, N. Y., Oct. 3, 1884.

Dear Sirs.—I have frequently prescribed your Malt Whiskey in my practice here; I consider it a very superior and reliable article, and can heartily recommend it in low states, in fevers, acute inflammations, and in depressing maladies generally, also as a tonic in feeble digestion and convalescence from acute diseases, when an alcoholic stimulant is indicated, and especially in Phthisis Pulmonalis.

FRED. H. SAWERS, M.D.,
L. R. C. P. Lond., etc.

KENTUCKY STATE COLLEGE
LEXINGTON, KY., March 15, 1885.

I hereby certify that I have made analysis of DUFFY'S Malt Whiskey, and found it to be absolutely pure, not containing a trace of fusel oil, or any other deleterious ingredient. It is peculiarly fitted for medicinal or any other purposes where a carefully prepared and unadulterated whiskey is desired.

ALBERT E. MENKE, D. Sc., F.C.S., F.I.C.,
Professor of Organic Chemistry, in the Kentucky State College, late Assistant Chemist, Department of Agriculture, Washington, D. C.

TO THE PROFESSION OR DRUG TRADE, $10.50 PER DOZEN, NET.

To any Physician writing to us, mentioning this Journal, we will send a **quart bottle** as a sample, for **$1.25,** the same neatly packed in a wooden case, without mark. Address,

The Duffy Malt Whiskey Co.,
53 South Street . Baltimore, Md.

☞ In corresponding with Advertisers, please be sure and mention The Medical Analectic.

ERYTHROXYLON COCA

AND

VIN MARIANI

FORMULA.—VIN MARIANI is the concentrated extractive of the leaf of Erythroxylon Coca, and an excellent special quality of Bordeaux Wine; each bottle containing the medicinal properties of two ounces of the fresh, *selected* leaves, equal to thirty grains to a wineglassful.

DOSE.—Usual dose is one wineglassful about half an hour before, or *immediately after*, each meal; for children half the quantity.

We have correspondence from many physicians who have prescribed the "VIN MARIANI," recommending it in the treatment of

Anæmia, Biliousness, Pulmonary Troubles, Chloro-Anæmia, Dyspepsia, Difficult Convalescence, Gastralgia, Consumption, Obesity, Weakness of the Vocal Cords, Huskiness of the Voice, Lymphatism and Scrofula, Laryngeal Granulations, General Debility, Profound Depression of the Economy, Sequelæ of Childbirth, Asthma, Impoverishment of the Blood and Malarial Complaints, Syphilis.

"VIN MARIANI" nourishes, strengthens, sustains, and refreshes; it has been prescribed throughout Europe since 1863, and is pronounced by every physician who tests it as the most agreeable and efficacious of *all tonics* and *stimulants*, very palatable, and borne by the most enfeebled stomach where every thing else failed.

"VIN MARIANI" is well adapted for children and persons in delicate health, and for convalescents, as it sustains life for a long period, and nourishes without any other food or drink; and above all, having that great advantage and superiority over cinchona, iron, and other so-called tonics, that it essentially strengthens, and may be taken for any length of time without *any* fear of *inflammation* or injury to the *gastric juices*, and *never* causing *constipation*,—on the contrary, *aids* digestion and assimilation, removing fatigue and improving the appetite.

"VIN MARIANI" supplies exactly what physicians have so long felt the need of in their practice: a perfectly reliable diffusible tonic and stimulant, without any unpleasant reaction; a strengthener of the entire system, and the most excellent adjuvant in the treatment of disease, asserted on the authority of the most eminent members of the medical profession of Europe, after thorough and severe tests for a number of years, with best of results in every instance.

Vin Mariani is used in the Hospitals, Cliniques, and Public Institutions throughout Europe, and by the entire Medical Profession.

On application, we will mail, free of expense, to any physician, the most complete and interesting essay and treatise on "ERYTHROXYLON COCA," and "VIN MARIANI," specially translated from the French, with notes and opinions of such men as Monardes, Acosta, Linnæus, Wedell, Boerhaave, Fuentes, Littre, Robin, Schwalk, Gazeau, Reveil, Gubler, G. See, Dechambre, Niemann, Woehler, Rabuteau, Pean, Barth, Cabrol, Fauvel, Morell Mackenzie, Lennox Browne, Elsberg, Chapusot, Conqueret, and others.

PARIS, 41 *Bd. Haussmann*, 41.

LABORATORY: NEUILLY-SUR-SEINE.

MARIANI & CO., **19 East 16th Street,** Between Broadway and Fifth Ave., NEW YORK.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

THE
MEDICAL ANALECTIC
A
MONTHLY EPITOME OF PROGRESS IN ALL DIVISIONS OF MEDICO-CHIRURGICAL PRACTICE

EDITED BY
WALTER S. WELLS, M.D.

VOL. II. No. 9. September, 1885. WHOLE No. 21.

ZYMOTIC.

Treatment of Cholera During the Algid Period.—Dr. Georges Rigoletti (*Jour. de méd. de Paris*) attributes the principal symptoms of the algid period of cholera, such as lowering of the temperature of the exterior of the body, cyanosis, change of countenance, inextinguishable thirst, difficulty of respiration, epigastric constriction, hiccough, vomiting, muscular cramp, prostration, general collapse, and paralysis of the heart, to a lack of the normal proportion of water in the blood. Two indications correspond to the symptomatology :

1. To restore to the tissues their normal water, and to the blood its normal serum, in order that it may perform its functions.

2. To excite the nervous force and to stimulate the heart. To fulfil these indications Dr. Rigoletti proposes the hot bath, containing ammonia and wood ashes.

The bath is prepared with water of a temperature ranging from 100.4° F. to 104° F. ; about one quart of aqua ammonia and a sufficient quantity of wood ashes. The duration of the bath is from fifteen to twenty-five minutes, and it may be renewed in the same day, and for many days in succession, according to the case. To avoid the ammoniacal vapors, the patient is so covered as to prevent their reaching the head. The patient on being removed from the bath, is covered with warm blankets, which favor and maintain reaction. Frictions with camphorated alcohol are also to be practised, and aromatic infusion of chamomile and spirits are to be administered. If the reaction come on too violently, it is to be moderated by ordinary measures. The efficacy of the bath is more prompt when the algid state is least advanced. The method was used in 1884 with much success in the epidemic at Naples, and the official report as to its value is as follows :

1. The hot alkaline bath administered at the beginning of the algid period stimulates the peripheral circulation and increases the power of reaction.

2. The nervous forces are strengthened ; the patient is so much relieved that many times during the day he requests the bath ; the constriction of the epigastrium diminishes and disappears.

3. The pulse, often imperceptible, is gradually strengthened ; the features become more natural, and the face even sometimes becomes flushed. Anuria almost always ceases in the bath.

4. Diarrhœa continues, but the vomiting and hiccough disappear with the administration of the bath.

5. The ammoniacal vapors excite cough and interfere with respiration, and for this reason it is necessary to protect the patient from them. However, the effect of the vapors is beneficial in that they increase the power of the voice, and render it less rough and more intelligible. In conclusion, the hot alkaline bath is a powerful therapeutic agent in the algid period of cholera, and its effects are most constant.

Dr. Rigoletti concludes his paper by stating that reaction, under treatment with the bath, is always *prompt*, occurring within twenty-five minutes ; *complete*, as shown by the disappearance of all algid symptoms ; and *constant*, having never failed in twenty-three such cases so treated. Dr. R. considers it superior to intravenous injections of salt water proposed by Dr. Hayem, and to the subcutaneous alkaline injections of hot water suggested by Prof. Cantani.—*Am. Jour. Med. Sc.*, July.

Cholera Contagion.—Attention is being opportunely directed to the fact that

the next few months will see several thousand packages of fruit consigned to the United Kingdom every week from the southern and western coasts of Spain—notably nuts from Barcelona, lemons from Valencia, and grapes from Almeria. These last are packed in barrels, filled up with cork-dust ; and the attention of the authorities is called to the importance of this fact, in view of the great epidemic of cholera in Spain. This is the more important, inasmuch as cholera-contagion is believed to be frequently conveyed by food. — *British Med. Jour.*, Aug. 15th.

Typhoid Fever at Plymouth, Penn.—We have here another of the proofs, which have so often come to us from America, to the effect that the infection of typhoid fever is not destroyed by freezing, and that the process of freezing only affects it in so far as it holds it in store until it has opportunity of gaining access to the human system. When held in ice, its potency is found to be in no way diminished, when that ice is melted by being mixed with drinks, or otherwise used for human consumption ; and in the instance now under consideration the frozen mass retained all its power for mischief, only awaiting the thaw which admitted it into the general water-supply of the town. Another point of interest is indicated in the report : mere filth, such as was contained in the sewage-befouled river, is often quite powerless to produce typhoid fever, whereas a comparatively small proportion of the excreta of a typhoid patient is potent for widespread mischief.—*London Lancet*, Aug. 8th.

Typhoid with Epistaxis.—For the treatment of epistaxis introduce into the nostril, to a considerable distance upward, a piece of fine sponge, cut to the size and shape necessary to enable it to enter without difficulty, previously soaked in lemon juice or vinegar and water. The patient is to be kept lying on the face for a length of time, with the sponge in place. "This," says the *Lyons médical*, "is the procedure employed by M. Siredey for controlling epistaxis in typhoid-fever patients."—*Med. Herald*, Aug.

Treatment of Diphtheria by the Faradic Current.—The *Centralbl. für die Gesammte Therapie* for May mentions another remedy for diphtheria, in the form of the faradic current. This is to be applied with one electrode on the nape of the neck, and the other on the front of the throat, both being well moistened. The current should be strong enough to be felt in the throat, but not so as to cause too much movement, It should be applied from two to four times a day ; improvement may be looked for after the first application, and the throat is soon clear of the membrane. The electrodes must be thoroughly disinfected after each application. The results are said to be better than those of gargling or brushing out the throat.—*London Med. Record*, July.

Iodine in Diphtheria.—Adamson adds his testimony to the efficiency of the iodine treatment. He lost only two patients out of fifty-five treated with the tincture alone, although some of the cases were very grave, For adults he gives from five to seven minims every hour, and for children between six and twelve years of age from two to three minims every two hours. Special mention is made of syrup of quince for disguising the taste of the drug.—*N. Y. Med. Jour*, Aug. 15th.

Vaccination after Exposure.—According to the last quarterly report of the proceedings of the Illinois State Board of Health, 144 persons suffered from small-pox, the disease having been contracted at a negro "protracted meeting," and of this number 120 had never been vaccinated. Within from three days to "about a week," 14 of these 120 persons were vaccinated. Amongst the remaining 106 cases 38 died, being a mortality at the rate of 35.84 per cent. Of the 14 vaccinated after exposure all recovered ; and amongst the 37 who had been vaccinated prior to exposure, one single person, vaccinated once twenty-five years before, died. The late Mr. Marson attached no value to vaccination if performed after an interval of four complete days from the exposure, his statement being as follows : "Suppose an unvaccinated person to inhale the germ of variola on a Monday ; if he be vaccinated as late as the following Wednesday the vaccination will be in time to prevent small-pox being developed ; if it be put off until Thursday the small-pox will appear, but it will be modified ; if the vaccination be delayed untill Friday it will be of no use—it will not have had time to reach the stage of

areola, the index of safety, before the illness of small-pox begins." But the Illinois report gives prominence to the belief that vaccination has a positive therapeutic value as well as the prophylactic power to which Mr. Marson referred, and in the fifth annual report of the Board of Health it is alleged that "if a patient be vaccinated during the febrile stage and the vaccination progress normally . . . the areolar stage of vaccination will be reached before the dangerous tenth day of the variolous disease, and, as has been repeatedly witnessed, the graver disease will be aborted, jugulated, or materially modified." Hence it is inferred that it is never too late to vaccinate; we prefer, however, the alternate maxim laid down, which is that in cases where there has been possible exposure "it is never too soon to vaccinate."—*London Lancet*, Aug. 22d.

Disinfection in Scarlet-Fever.—The skin is efficiently disinfected in the desquamative stage of scarlet-fever, by sponging with a one-in-twenty solution of aromatic acetic acid. A muriatic-acid solution of similar strength will disinfect the excreta.—*Med. World*, July.

NEUROTIC.

"Dentist's Leg."—At the meeting of the Odontological Society in June, Mr. Dennant, of Brighton, said he had himself suffered from what their medical friends were learning to call the "dentist's leg." About two years since the pain became unbearable after standing three or four hours, resembling very much the application of scalding water to the outer part of the thigh in the region of the external cutaneous nerve. It seemed to be due to nervous exhaustion from the undue strain thrown upon the part. Medical friends and common sense suggested rest as the remedy, and this he secured by means of the Lyons stool. He had used this for about two years with great benefit, and could now get through a day's work with comparative comfort.

George Johnson, M.D., F.R.S., Professor of Clinical Medicine, Senior Physician to King's College Hospital, says: Some time since I had my attention directed to this subject in consequence of having been consulted by a dentist, about thirty-five years of age, who described to me a sensation of numbness in one thigh, which he feared might be a precursor of paralysis. I soon, however, relieved him of his anxiety by giving him what I had no doubt is the true explanation of the perverted sensation. Our everyday experience teaches us that overstrain and fatigue may be direct cause of pain in the muscles concerned; but, besides this, the long-continued rigid contraction of the muscles which are engaged in maintaining such a fixed position as the operating dentist often has to assume must greatly impede the circulation, not only through the muscles, but also through the integuments. As the alternate contraction and relaxation of the muscles—in walking, for instance—assists and quickens the circulation, so the state of fixed and rigid contraction must obviously impede and retard the circulation, by exerting a continuous pressure upon the blood-vessels, and more especially upon the soft and easily compressed veins. The impeded circulation affects not only the muscles, but also the skin and subcutaneous tissues, and the nerves which supply the different tissues; and one result of a defective circulation through the nerves is to cause various perverted sensations—such as numbness, a sensation of "pins and needles," or a painful feeling of heat and scalding. The immediate cause, then, of the painful sensations experienced and so graphically described by Mr. Dennant appears to be, not, as he suggests, "nervous exhaustion," but perverted nerve function, directly due to a mechanical impediment to the circulation through the rigidly contracted muscles and their associated nerves. It is probable, too, that direct compression of the nerves by the firmly contracted muscles may have some influence in the causation of the perverted sensations referred to the cutaneous terminations of the nerves.

I have often been consulted by men and women beyond middle age who have been alarmed by a feeling of numbness, or "pins and needles" in the extremities. In these cases the defective circulation, which is the direct cause of the perverted sensation, is often the result of an enfeebled condition of the heart, with or without excessive general obesity, and often with more or less general emphysema of the lungs.

To return to the "dentist's leg." The obvious means of prevention and of cure consist in rest for the overstrained limb, or such a frequent change of position as is

equivalent to a certain amount of rest. Standing in one position is notoriously more fatiguing than walking, and for the obvious reason that while in standing one set of muscles is in a constant state of active contraction, the circulation through them being thereby retarded and enfeebled, walking involves alternate contraction and relaxation of the muscles, with an invigorated and quickened circulation.

More than one speaker during the discussion referred to the benefit to be derived from some form of active muscular exercise after the day's work. It is probable, too, that systematic friction and massage of the affected limb would be beneficial.—*London Lancet*, Aug. 15th.

Locomotor Ataxia — Perforating Ulcer of the Hand. — At a recent meeting of the Surgical Society of Paris, M. Terrillon (*Revue médicale*, June 13, 1885), presented a patient, aged twenty-six, who had on both hands ulcerations surrounded with thickened epidermis resembling exactly perforating ulcer of the foot. The lesions were surrounded with an anæsthetic zone. There could be no doubt of their origin from a central nervous lesion, and the patient also had other symptoms pointing unmistakably to locomotor ataxia. M. Terrillon had also presented a similar case at a previous meeting. M. Trélat recalled an observation previously made by him, of the relation between perforating ulcer and central nervous lesion, and stated that he had seen the ulcers upon both hands and feet in the same subject, who was ataxic.—*N. Y. Med. Record*, Aug. 15th.

Paralysis of the Sympathetic. — Dr. Lewinsky reported a case of the above at the last meeting of the Berlin Medical Society. The patient was a woman who had suffered from gastric ulcer, and who as a child had a small goitre which had increased in size during the last ten years. At the time of reporting it was the size of a goose-egg, was seated on the right side, and had curved the trachea to the left. The right upper eyelid drooped, the pupils were diminished in size, the eye lay deeply within the orbit. The fundus oculi was normal. The right side of the face showed almost complete absence of sweat secretion, and the temperature was 0.2° C. lower than on the left. The forearm and hand were occasionally swollen. The temperature of the right hand was 2° C. lower than that of the left. The patient came under observation a second time with hæmatemesis and parotitis. The latter went on to suppuration, and required incision. The secretion of sweat was less and the temperature lower on the right than on the left side. The speaker claimed that the symptoms presented were typical of paralysis of the sympathetic, that the interest of the case consisted in the long continuance of the œdema without disturbance of the circulation and with normal sensibility and mobility. As regarded the locality of the lesion, the supposition that it was produced by pressure of the goitre would not be far astray.—*London Med. Press*, Aug. 5th.

Blisters in Head-Symptoms Produced by Cranial Lesions.—Dr. Handfield Jones records two instances of cerebral symptoms from long previous injury to the head. The first case was that of a man aged thirty-four, who received a cut on the right forehead sixteen years ago, and for the last two and a half years suffered from pain around the right eye and headache all over the head, which was generally brought on by exertion. He had frequent attacks of giddiness, and occasional fits of unconsciousness. The patient was under Dr. Jones' care for about two months, during which time ten blisters, at various intervals, were applied to the forehead, producing each time almost instant relief from pain for many hours, and sometimes days. The second case was that of a navvy, who received several wounds on the scalp through some bricks falling upon him. About two years after the accident he became subject to attacks of giddiness. In this case eighteen blisters (in all) were applied to the head, the result being a complete recovery from all his bad symptoms; and when he was seen by the author, fourteen years afterward, there had been no return of the attacks.—*London Med. Record.*

Epilepsy and Nasal Polypi.—To the cases already cited of different forms of reflex epilepsy cured by removal of the exciting cause, the following one of Fincke may be added (*Moniteur de la Policlinique*, June 7, 1885). A man, sixty-four years of age, was suddenly seized with numerous and repeated attacks of epilepsy, for which no other possible cause could be found

than obstruction of the right nasal fossa by a mass of polypi resembling a bunch of grapes. These polypi were extirpated, and the convulsive attacks at once ceased, and had not returned at the time of the report, two years after the operation.—*N. Y. Med. Record*, Aug. 22d.

Ergot as a Remedy for Hiccough.—Dr. E. Bonavia, of the British Indian Medical Department, in a short communication to the *Lancet*, after mentioning the usefulness of ergot in various hemorrhages, says: "Very few, however, may have heard that ergot will cure hiccough. Last autumn there was in this district an extensive epidemic of intermittent fever. The police hospital was full of fever cases. One day a policeman was admitted with an obstinate hiccough. He said he had had it for some days, and had no other ailment. I tried many remedies—sedatives, narcotics, antispasmodics, and counter-irritants. I examined his body to see whether there might not be some latent hernia in any part which might be the cause of it, but found nothing. I gave him a large antispasmodic enema, and then a strong purgative. The hiccough went on. I next tried chloroform and subcutaneous injections. As long as their effects lasted, freedom from the distressing spasm was experienced. Then it came on again with unabated force. The patient began rejecting his food and every thing he took by the mouth. The case was taking a serious aspect, and I thought death would ensue. As a last resource I ordered the liquid extract of ergot in drachm doses. I did this simply because I knew it had a decided action on muscular fibre. The first dose moderated the spasm, the second did further good, and the third or fourth stopped it altogether. The patient had some rest, but later on the hiccough returned. Three or four doses stopped it again; it never returned and the man was well.—*N. Y. Med. Jour.*, Aug. 29th.

Elastic Electrodes.—It is often convenient to use large surface electrodes, and it is desirable that they be so made as to adapt themselves readily to inequalities on the surface. Zinc, lead, and various other materials have been used for the purpose, and have been found to answer tolerably well, but they are simply flexible and not elastic; consequently they do not recover their flat shape after being used, and some of them are open to the objection that they are uncomfortable for the patient to lie upon, while in others the metallic portion is quite small in comparison with the extent of the sponge attached to them, so that the current is not so diffused as is sometimes desirable. To remedy these defects, Dr. James Craig, of Jersey City, has hit upon the expedient of using electrodes made of woven brass wire nickel-plated. Dr. Craig has shown us a set of these electrodes, and it is certainly to be said of them that they seem admirably calculated to do away with the objections we have mentioned.—*N. Y. Med. Jour.*, Aug. 22d.

Neurasthenia.—Maximowitch recommends the following for the treatment of neurasthenia due to anæmia:

℞ Ferri bromidi,
Quiniæ hydrobrom. . . āā 3 j.
Ext. rhei . . . . . q. s. M.
SIG.—Ft. pil. cxx.
Dose: Two pills three times daily.

—(*Revue de Thérap.*) *Phila. Med. News.*

RESPIRATORY.

Acute Œdema of the Epiglottis—Incision.—Dr. G. B. Hope, of No. 34 West Fifty-first Street, reports the case of a man, fifty-four years of age, who presented himself at the clinic of the Post-Graduate Medical School, suffering from urgent dyspnœa. Laryngoscopic examination showed acute œdema of both ventricular bands rising high in the larynx, with the narrowest possible opening of the glottis, especially during inspiration. The swelling was most pronounced in the anterior portion, though pretty general throughout, and the cords were not visible in any part. Following the examination such a marked spasm occurred as seemed to threaten suffocation and to demand instant tracheotomy. The extreme urgency passed by, however, and as soon as a laryngeal knife could be procured the parts were freely incised. There was considerable hemorrhage, and the relief afforded by the operation was immediate. There was no return of the œdema, and four days later the parts had resumed their normal appearance. Subsequent examination showed that the œdema was limited chiefly to the epiglottis and aryteno-epiglottic folds. The shape of the epiglottis was somewhat unusual, it being more than ordinarily short and broad, and when first examined had an appearance

like that presented by the ventricular bands when largely infiltrated. The cause of the attack appeared to have been irritation, excited by the use of the finger in the throat to provoke vomiting. This case shows the readiness with which even extreme œdema may yield to free incisions, the necessity of the graver operation of tracheotomy being thus obviated,—*N. Y. Med. Record*, Aug. 15th.

Treatment of Hydatid Cysts of the Lungs by Means of Puncture.—A paper was read by Dr. Thomas, of Adelaide, Australia, on this subject, at the late Cardiff meeting of British Med Ass'n.

Such patients, the author said, often exhibit the most advanced symptoms of consumption. In one case the cyst weighed ten ounces, and contained two hundred and fifty-six square inches in superficial extent. There had been thirty-two cases of this disease collected by himself. In the Adelaide Hospital there had been five cases operated on. The general result of the treatment by perforation had been that of twenty-five operated upon five had died. The patients were of all ages, from ten up to fifty years. A cyst under the scapula might be opened by means of a puncture made under the clavicle, and the trocar and canula might be used. He personally had operated on five cases. Of these four did well and the fifth died. Altogether he made out that twenty-seven cures had arisen from thirty-two operations. Some persons had wished to put forward the idea that all cavities in the lungs should be treated by perforation, but he thought this out of the question in cases of phthisis. Finally, Mr. Thomas showed specimens of the various means taken to arrest hemorrhage after the operation, one of these being a cleverly devised bag resembling the fiddle-bags of Dr. Barnes, and the others india-rubber chest catheters made by Messrs. Mayer & Melzer.

Dr. Ward Cousins referred to the difficulty in the diagnosis of such tumors, and there was danger of inflammation of the sac after opening.

Mr. Thomas said that this was doubtless the case sometimes, but not so when the patient was found to be expectorating large fragments of hydatids. In Australia these cases were frequent enough, and in most cases there was no difficulty in that part of the matter. The operations had been most successful.—*N. Y. Med. Record*, August 22d.

Inhalations in Pulmonary Tuberculosis.—During recent times we have heard a great deal of the value of antiseptic inhalations in the treatment of phthisis. A further clinical investigation has been undertaken by Dr. Renzi of Naples. He has employed inhalations of four kinds: First, of iodoform and essence of turpentine, of which two to six drops every hour or two hours of a liquid containing one part of iodoform to twenty-five parts of spirit of turpentine were used; fourteen patients were submitted to this treatment. Secondly, iodoform volatilized every day in a bedroom thirty cubic metres in capacity, in the amount of .40 to 2.10 grammes, heated in a capsule by means of a sand-bath; three observations were made. Thirdly, sulphuretted hydrogen, evolved by the action of sulphuric acid on powdered sulphide of iron in such proportion that every cubic metre of atmosphere in the chamber should contain seventy-five cubic centimetres; seven cases were thus treated. Lastly, sulphurous acid, made by burning sulphur in a closed chamber, so that there should be forty-three cubic centimetres of the gas in a cubic metre of the atmosphere. Dr. Renzi has found that the first two methods of treatment ameliorate the local condition and general nutrition, without modifying the pyrexia, diarrhœa, or nocturnal sweatings. Inhalations of sulphuretted hydrogen and sulphurous acid seemed to increase the general strength, improving the nutrition, and increasing the quantity of urine discharged. Sulphuretted hydrogen had a special influence on the respirations, which were diminished in frequency; it also exercised a beneficial influence on the cough; but the fever, diarrhœa, and diaphoresis were not relieved. Of all the inhalations, the author decides in favor of turpentine and sulphuretted hydrogen.—*London Lancet*, July 25th.

Pneumonia, Adynamic—Hypodermic Injections of Ether.—In adynamic pneumonia when there is considerable depression of strength and the ordinary means have been exhausted, while the patient is menaced by asphyxia, Dr. Barth injects hypodermically a Pravaz syringeful of sulphuric ether, repeating it a second, third, or even a fourth time in the day in

bad cases. These injections render the cough easy and allow the bronchi to clear themselves. They may be inserted at the external side of the thighs, the back, or sides; and they give rise to a sharp burning sensation, which, however, soon subsides. Dr. Féreol employs these injections whenever he has to do with excessive debility consequent on hemorrhage, typhoid fever, etc. He regards them as a valuable means of restoring life to patients who are exhausted and threatened with speedy death. Dr. Moutard-Martin has used them with success in the algidity and cramps of cholera. —(*Union médicale*) *London Med. Times*, Aug. 8th.

Pneumonia, Acute.—In the early stage of a case of *pneumonia*, Prof. Da Costa gave:

℞ Tinct. verat. virid. . . gtt. iij.
Liquor. potass. citratis . . f ʒ iij.
Spirit. æth. nitrosi . . . f ʒ ss.
Syrup. zingiberis, ad. . . f ℥ ss. M.

SIG.—Every three hours.

—*Col. and Clin. Record*, Aug.

Lactic-Acid Treatment of Tuberculous Deposits.—Dr. H. Krause highly recommends the application of lactic acid to the laryngeal ulceration and swelling caused by tuberculous deposit. He begins with a ten-per-cent. solution, and rapidly increases it to eighty per cent. A number of cases are reported in which the ulceration was completely cured by these applications, notwithstanding the presence of tubercle-bacilli. In view of the unfavorable course which such cases generally pursue, and the failure of all other treatment, the author thinks this is a decided step in advance. He also believes that lactic acid will be found useful in other disorders of the throat.—(*Berliner klin. Woch.*) *Phila. Med. Times*, Aug. 22d.

Tuberculosis.—Potain recommends the annexed prescription as a remedy in tuberculosis:

℞ Sodii chloridi . . . . . ʒ ijss.
Sodii bromidi . . . . . gr. lxxv.
Potassii iodidi . . . . . gr. xv.
Aquæ dest. . . . . f ℥ iij. M.

SIG.—Dessertspoonful every morning in a cup of milk.

—(*Revue de Thérap.*) *Phila. Med. News*, Aug. 15th.

Nasal Polypi.—The following powder is recommended by a French writer as oftentimes efficacious in the treatment of polypi of the nasal passages: Morphine hydrochlorate, 1½ grains; powdered cubebs, 2½ drachms. A pinch of the powder to be snuffed up five or six times a day.—*N. Y. Med. Record*, Aug. 15th.

Hæmoptysis.—Prof. Bartholow says that for hæmoptysis "ipecacuhana is a remarkable physiological remedy." In a case at the clinic it was given in combination, as follows:

℞ Ext. ipecac. fluidi,
Ext. ergot. fluidi . . . āā gtt. v. M.

SIG.—At a dose,

—*Col. and Clin. Record*, Aug.

Asthma.—The following combination, of Prof. Bartholow's, for asthmatic attacks, has been found very useful:

℞ Ext. grindeliæ fluid. . . . f ℥ ss.
Ext. lobeliæ fluid. . . . . f ʒ ij.
Ext. belladon. fluid. . . . f ʒ j.
Potassii iodidi . . . . . ʒ iij.
Glycerini . . . . . f ℥ iij. M.

SIG.—Tablespoonful as required.

—*Col. and Clin. Record*, Aug.

CIRCULATORY.

Acute Pericarditis in the Aged.—The diagnosis of acute pericarditis is sometimes difficult even in adults, but it is yet more so in the aged. In them there are often old pulmonary lesions, chronic bronchitis, and emphysema, or valvular and other cardiac affections which serve to mask the sounds proper to pericarditis. If, in addition to these, there are also signs of recent intrathoracic disease, the symptoms become still more obscure. This is shown by M. Chas. Lejard, in a recent thesis (*Revue médicale*, June 6, 1885), who states that of the thirty-two cases of pericarditis in the aged, which form the basis of his paper, in but nine was the diagnosis made during life. The symptoms which should excite suspicion in the mind of the medical attendant are, the author says, a certain difficulty in respiration, usually increasing for several days; an elevation of temperature from 2° to 3.5°; dull, irregular, intermittent, or even tumultuous heart action, and a corresponding state of the pulse. If, during the course of a pneumonia or some other febrile disease, a sudden fall of temperature occurs, and is accompanied by the irregularity of heart-action above referred to, one ought to think of the possibility of

pericarditis. The examination of the physical signs and the presence of friction-sounds would serve to establish the diagnosis, but this will be usually a diagnosis by exclusion. The treatment of pericarditis in the aged offers nothing of note. Local counter-irritant blisters or dry cups are to be used, but, above all, tonics are indicated, such as quinine, alcohol, and digitalis. These will form the basis of the treatment. If there is a very abundant serous effusion, the pericardium may be tapped, and the fluid drawn off, the advanced age of the patient affording no contra-indication to this mode of treatment.—*N. Y. Med. Record*, Aug. 29th.

Weakness of the Heart's Action.—In the course of a recent lecture on "Arterial Atheroma and Cardiac Affections," M. Lancereaux (*Union méd.*) remarked that the treatment of systolic weakness should vary with the nature of the case. When it depends on dilatation of the right heart, recourse should be had especially to purgatives, for digitalis is no longer efficient, and this is readily understood at the autopsy, when the right heart is found with its walls hardened and stiffened, and remains gaping after it has been cut open. When, however, the weakness is due to atheroma of the coronary arteries, even if at the same time the heart is a little steatosed and sclerosed, digitalis acts more energetically, and it is of great service to use it in conjunction with other diuretics. The author often uses the following formula :

Scammony, Squill, Digitalis,	each	15 grains.

Divide into twenty pills, from four to six of which are to be taken daily, a milk diet being prescribed at the same time.

—*N. Y. Med. Jour.*, Aug. 29th.

Berries of the Snow-ball Tree in Angina Pectoris.—The successful results obtained by Dr. Jacubovsky in two cases of angina pectoris treated by dried leaves of the snow-ball tree (*Viburnum Opulus*) led Dr. Manguby, of Odessa (*Russkaia Meditzina*, No. 6, 1885, p. 123), to try the dried berries of the snow-ball tree in a severe case of the same disease in an obese lady, aged forty, who had been for eighteen months unsuccessfully treated by castoreum, convallaria, assafœtida, nitrate of silver, bromide of potassium, valerian, steel, quinine. An infusion made of two tablespoonfuls of dried snow-ball berries to one glass of water, and divided into three or four portions, was taken daily. After two months' treatment the paroxysms began to come only once in four or six weeks (instead of every two or three days, as they had used to occur before). The same treatment being continued for another six months, the patient gradually made a complete recovery. Not a single paroxysm of angina occurred during these eight months. —*London Med. Record.*

Aneurism of the Common Carotid, Cured by Rest, Iodide of Potassium, and Compression.—George D. Macintosh, L.K.Q.C.P.I., reports the following :

Mrs. T. P——, aged thirty-five, was first seen by me on March 27, 1883. I found her to be suffering from a pulsating tumor on the right side of the neck, opposite the upper border of the thyroid cartilage. On palpation the tumor was found to pulsate in an expansile manner—that is to say, the pulsation was equal all round as far as could be felt. On pressure the tumor could be completely emptied, and when the fingers were removed slowly refilled again by several successive pulsations ; it was evidently in connection with the common carotid artery. On auscultation a distinct bruit was audible. The patient suffered considerable pain, both at the site of the swelling and in the face, of a neuralgic character. Mr. Henry Summerhayes, who saw the case with me on this occasion, fully confirmed my diagnosis of aneurism of the common carotid at its point of bifurcation into the internal and external carotids. We prescribed in the first instance considerable doses of iodide of potassium, with complete rest in the recumbent position and a spare diet.

On April 23d, there being but little improvement in the symptoms, and the pain being so severe as to necessitate the frequent hypodermic injection of morphia, I determined to try partial compression by means of a firm elastic collar with a cork pad attached, so arranged as to lie completely over the tumor and to empty it of blood, whilst the circulation was not greatly interfered with ; at the same time the previous treatment was persevered with. After a week's use of the collar the patient professed herself greatly better, the pain being much less severe ; but there was considera-

ble pulsation to be felt through the pad ; I therefore somewhat tightened the lacing of the collar, and this had to be done again and again at intervals of a few days. At the end of three months I removed the collar completely, as there was no longer any pulsation to be felt over the tumor, which had completely solidified, and has since given the patient no more trouble. She is now (May, 1885) going about her work as usual. Mr. Summerhayes again saw the case last summer, and was greatly surprised at the cure effected, which he acknowledged to be complete. — *London Lancet*, Aug. 15th.

Syrup of Hydriodic Acid in Acute Rheumatism.—Dr. James Craig, Jersey City, speaks highly of the syrup of hydriodic acid in the treatment of acute inflammatory rheumatism. It shortens the duration of the disease, relieves the pain, reduces the temperature, and leaves the patient without heart complications. The dose generally given is two to three teaspoonfuls in a wine-glass of water, every two hours, according to the indications. He claims that it also acts well in subacute rheumatism, but has no effect in the chronic form of the disease. Numerous cases are added showing its efficacy.—*N. Y. Med. Jour.*, Aug. 8th.

Antipyrine in Rheumatism. — Dr. Immermann has found antipyrine a most efficient remedy in acute and marked articular rheumatism. He states that it not only reduces the temperature, but also exerts a specific action on the joint manifestations. In one case of marked rheumatism of the trifacial nerve a permanent cure followed the exhibition of only one drachm of the remedy.—*N. Y. Med. Record*, Aug. 15th.

Filaria Sanguinis Hominis. — It would appear that we are now within a measurable distance of completing the life history of this interesting and important parasite. At a recent meeting of the Sci-I-Kwai in Tokio (*vide* Transactions of that Society, No. 6), Mr. W. de L. Eastlake made an interesting statement as to Dr. Manson's latest views on the subject. Dr. Manson suggests that the *Paludina*, a large fresh-water univalve, is the intermediary host. It will be remembered that Dr. Manson has already shown how the filaria is swallowed by the mosquito, and how the worm progressively grows in the inside of the mosquito until it has attained its full development ; the mosquito then dies and the worm is liberated into a stagnant pond. The *Paludina* inhabits stagnant water, and, moreover, it has a peculiar habit of crawling along the surface of the water, eating every thing it comes across, and it certainly devours the eggs of the mosquito as well as the partially decomposed or dissolved body of the mosquito. This mollusc is largely eaten both by the Chinese and Japanese. Mr. Eastlake proposes to carry out the following experiments, which should be decisive as to the correctness or otherwise of Dr. Manson's theory. (1) To inject *filaria* into some large water-beetle. Put the beetle into a receptacle filled with stagnant water and containing *Paludinæ Stetmaphora*. So soon as the beetle dies, make periodical microscopic examinations of both water and *Paludinæ*. (2) To put *filaria* directly into water in which there are *Paludinæ*, or inject them into *Paludinæ* and watch the result. (3) To let the patient be bitten by mosquitoes, collect these and put them into water in which there are *Paludinæ*, and then carefully watch the result. Dr. Suzuki (who had just previously reported a case, with result of *post-mortem* examination, in which filaria had been present in the blood three months before death) observed that the mollusc in question was used as bait to catch a kind of fish which the Japanese eat raw. So that it is possible that the worm passes through two intermediary hosts before reaching the human stomach ; anyhow we shall look with much interest for the report of the projected experiments.—*London Med. Times*, Aug. 15th.

Chlorosis.—In *chlorosis*, the following has often been of avail :

℞ Ferri sulphat. exsic. . . . ʒij.
Quininæ sulph. . . . . ʒj.
Strychninæ sulph. . . . . gr. ss. M.
Ft. pil. No. xx.

SIG.—One pill, three times a day.—(Bartholow.)

—*Col. and Clin. Record*, Aug.

Hemorrhage.—As an *anti-hemorrhagic* combination, Prof. Bartholow speaks highly of :

℞ Extract. ipecac. fluid. . . . f ʒ ij.
Extract. ergotæ fluid. . . . f ʒ iv.
Extract. digitalis fluid. . . . f ʒ ij. M.

SIG.—Thirty minims to a drachm at a dose, pro re nata.

—*Col. and Clin. Record.*

Cardiac Spasms.—Nitrite of amyl is well given in sweet spirits of nitre, which is also useful in arterial spasm and in the heart-pangs of angina pectoris.—*N. Y. Med. Record.*

Gout.—Lithium iodide is said to be the most useful of the lithium salts in the treatment of gout.—*Birmingham Med. Rev.*, Aug.

Ligature of Blood-Vessels.—Permanent obliteration in arteries, after ligature, takes place in from four to seven days, in veins from three to four days.—*Medical World.*

ALIMENTARY.

Atonic Dyspepsia. — G. J. Preston, M.D., Professor of Practice of Medicine, Baltimore, finds that atonic dyspepsia is by far the most common form of indigestion met with at the Polyclinic.

The alkaline treatment, even in cases where acidity was marked, was soon discarded as being only temporary. Sometimes the combination of a simple bitter, as tincture of columbo with soda bicarbonate, acts well for a time. Pepsin has proved of little value in adults unless given in quantities larger than most dispensaries can afford, or than a patient will take.

The most generally useful drug is strychnia in the form of tincture nux vomica. This can be given in much larger doses than it is prescribed. For many of the cases the initial dose was gtt. x. to xx. t. i. d. with as much acid hydrochlor. dil. This given before meals in cases where the normal acid is in excess, and after meals where it is deficient in quantity, is of inestimable service. It is by no means a new treatment, but after a somewhat careful and extensive experience with it, it has proved the most satisfactory.

In some of these cases where, in addition to the ordinary symptoms, there is pain, a very good plan is to add to the above, m. i. to iii. of acid hydrocyanic dil.

This drug seems to have a peculiar sedative action upon the terminal nerves of the stomach, and will be found useful in various painful affections of this organ.

Many of these cases improve rapidly on iron, and the best way to overcome the unpleasant effects which often prevent its use is by combining gr. x. of pot. brom. with gtt. x. to xx. of the tincture of the chloride. *Md. Med. Jour.*, Aug. 15th.

Hydrochloric Acid in the Treatment of Dyspepsia.—In an article on the treatment of diseases of the stomach ("Ztschr. f. klin. Med."; "Dtsch. Med.-Ztg."), Prof. Talma, of Utrecht, lays stress on fermentation of the contents of the stomach as being either the cause of dyspepsia in the great majority of instances, or at least the leading factor in keeping it up. This fermentation is generally due to a deficiency of hydrochloric acid, an artificial increase of which is therefore indicated. For adults, the author recommends a mixture of fifteen grains of the acid and twenty-two ounces of water to be taken in the course of twenty-four hours. The doses had better be taken after eating, and sensitive patients may take them lukewarm. He has observed excellent results of this treatment after the failure of long-continued alkaline medication, and even in cases of ulcer or cancer of the stomach he has seen it subdue such of the symptoms as were due to abnormal fermentation.—*N. Y. Med. Jour.*, Aug. 29th.

Cupping in Hernia.—Dr. Middleton sends us the following interesting bit of experience. "A few years ago, while practising in the country, I was called in haste to a case of strangulated hernia. Patient had been ruptured on both sides for several years, and had worn no truss, though his bowels had given him trouble, sometimes on one side, sometimes on the other. I found an oblique inguinal hernia, about the size of a hen's egg, upon the right side. Gave an opiate and tried to reduce, but failed; then sent for chloroform. In the meantime the patient suffered such intense pain in the region of the umbilicus that I tried to mitigate his sufferings by placing two large dry cups in that locality. The cups used were common glass tumblers. After allowing them to remain for a few minutes, I found, to my surprise, that the hernia was gone. I shouldered my saddle-bags, and, with a word of advice about a well-fitting truss, went on my way, rejoicing.—*Kansas City Med. Index*, Aug.

Operation for Intestinal Obstruction.—Mr. J. Greig Smith, London, Eng., submits the following rules for guidance in operating for acute intestinal obstruction:

1. Make the incision in the middle line below the umbilicus.

2. Fix upon the most dilated or the most congested part of the bowel that lies near the surface, and follow it with the fingers as a guide to the seat of the obstruction.

3. If this fail, insert the hand, and carry it successively to the cecum, the umbilicus, and the promontory of the sacrum.

4. If this again fail, draw the intestine out of the wound, carefully cover it until increase of distension or congestion, or both, in one of the coils gives an indication that the stricture lies near.

5. If there be considerable distension of the intestines, evacuate their contents by incision, and suture the wound. Never consider an operation for intestinal obstruction inside the abdomen finished, until the bowels are relieved from overdistension.

6. Be expeditious, for such cases suffer seriously from shock. The whole operation ought to be concluded in half an hour.—*Louv. Med. News*, Aug. 22d.

Radical Cure of Cancer of the Rectum.—Maurice Polosson, in an article on this subject in *La Lyon médicale*, proposes to operate for the radical cure of cancer of the rectum by first performing colotomy, and then making a secondary operation for extirpating the cancer. The preliminary operation renders the extirpation of the neoplasm more easy and less subject to subsequent complications. Polosson has tested this method in one case, making the artificial anus in the iliac region. This case recovered.—*Obst. Gaz.*, Aug.

Simple Acute Diarrhœa.—Dr. J. K. Spender, of the Mineral Water Hospital, Bath, England, thinks that the management of that common malady, alvine catarrh, has never been raised to the scientific level of many diseases of rarer occurrence, so that there is always a little uncertainty in the prognosis. He refers to a formula published by Dr. David Young, of Florence, in the *Practitioner* for March, 1875; about two minims of castor-oil were combined with three or four minims of the British Pharmacopœia solution of hydrochlorate of morphine, and rubbed into an emulsion with gum arabic. To this were added spirit of chloroform and a little syrup. This dose was to be repeated every hour or every two hours, according to the urgency of the case. If the diarrhœa was chronic, the quantity of castor-oil was increased; if there was much pain, more morphine was prescribed. He has found Young's mixture extremely valuable in nearly all forms of sudden and acute diarrhœa, such as are often seen during August and September, and scarcely less useful in some chronic conditions of irritable bowel which have baffled the so-called routine remedies; but he thinks that when the castor-oil and morphine fail, or do little good after four or five doses, it may even aggravate the malady to continue their use. Warm milk with lime-water is the best food, a mustard poultice may be put over the stomach, and there should be absolute rest in bed.—*N. Y. Med. Jour.*, Aug. 29th.

Entero-Colitis.—While the stools are yellow, homogeneous, and have a fecal odor, Dr. Louis Starr says alkalies and astringents are demanded, as:

℞	Sodii bicarb.	gr. xxxvj.
	Syr. rhei aromat.	℥ ss.
	Aq. menth. pip. q. s. ad. .	ʒ iij.

M. Sig.—One teaspoonful every three hours.

When the stools are green, acid, and numerous, alkalies with opium do best.

℞	Tinct. opii deod.	♏ vi.
	Bismuthi subcarb.	gr. lxxij.
	Syrupi	℥ ss.
	Mist. cretæ q. s. ad. . . .	ʒ iij.

M. Sig.—One teaspoonful every two or three hours.

In tedious cases, good results are at times obtained from minute doses of calomel, combined with opium and chalk.

Very frequent and serous stools require more powerful astringents.

℞	Acidi sulphurici aromat. . .	♏ xxiv.
	Liquor morphiæ sulphatis . .	ʒ j.
	Elix. curacoæ	ʒ ij.
	Aquam q. s. ad.	ʒ iij.

M. Sig.—One teaspoonful every three hours.

—*Med. Bulletin*, Aug.

Powder for Pyrosis.—M. Peter in *L'Union médicale*, July 18, 1885, recommends the following powder in the treatment of pyrosis:

℞	Sodæ bicarb.	gr. xl.
	Cretæ præcip.	gr. xv.
	Ext. nucis vom.	gr. iss.

M. Div. in chart. No. x.

Sig.—One three times a day for patients submitted to milk diet with whom the milk does not agree.

If diarrhœa is also produced, the subnitrate of bismuth should be prescribed in

doses of ten grains, combined with a sixth of a grain of extract of nux vomica, and from one sixth to one third of a grain of powdered opium.—*Phila. Med. News*, Aug. 8th.

Glycerine as a Tæniacide.—Dr. G. A. McCallum, England, recommends glycerine as a pleasant and effective remedy for tapeworm. The dose may range from ʒ ij. to ℥ j., to be followed by a purgative, if necessary.—*Med. Bulletin*, Aug.

Typhlitis.—A very bad case of Typhlitis came to Dr. Preston's clinic at the Dispensary, after having been treated by a druggist for ten days with strong purgatives. There was a large doughy tumor in the right inguinal region, giving a dull percussion note, and exquisitely tender to the touch ; abdomen was tympanitic, and there was very marked peri-typhlitis. Patient was put on milk diet, and a grain of opium given every three hours, with poultices to the abdomen.

This treatment was continued for two weeks, using opium both internally and externally. The inflammation gradually diminished, bowels were moved, and the patient made a good recovery.—*Md. Med. Jour.*, Aug. 15th.

Summer Diarrhœa.—In mild cases of summer diarrhœa, characterized by mere thinning of the intestinal discharges, and a feeling of lassitude with slight pallor, Prof. N. S. Davis recommends :

℞ Acidi sulphurici aromat. . . ʒ iiss.
Tinct. opii . . . . . ʒ iiss.
Syr. simp. . . . . ʒ iv.
Aquæ . . . . . ℥ ij.

M. SIG.—One teaspoonful two to four times a day.

—*Med. Bulletin*, Aug.

Chronic Diarrhœa.—J. Vose Solomon, Birmingham writes : In hospital and private practice, I am sometimes consulted by females of nervous temperament, on account of a chronic diarrhœa of several years' standing, and which has hitherto resisted medical treatment. As many as six or eight stools have been reported as passed daily. When failing to discover organic abdominal disease, the following formula has produced considerable mitigation, and sometimes a perfect relief to the symptoms. I am inclined to think the disorder is a neurosis.

℞ Acidi nitrici diluti ʒ ss., liquoris opii sedative (Battley) ʒ i, tincturæ gentianæ ℥ ss., infusi gentianæ ℥ ivss., aquam menthæ piperitæ fort. ad. ℥ viii.; one ounce to be taken three times a day.—*Brit. Med. Jour.*, Aug. 22d.

Gibier's Pills for Diarrhœa.—Take of

Sulphate of quinine . . . . . gr. ½
Extract of aconite,
Tannic acid . . . . of each gr. ⅛
Extract oi opium . . . . . gr. ⅛
Spirit of quince
Powdered licorice, of each, enough to make one pill.

—(*Union médicale*) *Med. World.*

URO-GENITAL.

Prolonged Retention Treated by Aspiration Daily for Five Weeks.—J. T. Hague, L.R.C.P., L.R.C.S. Ed., writes : Amongst instruments of modern invention, few are of more practical use in the treatment of disease than the aspirator, and one of its most generally recognized uses is for emptying of the bladder in cases of retention where a catheter cannot be passed. In such cases the choice of treatment lies between puncture of the bladder per rectum with a curved trocar and canula—a proceeding certainly requiring expertness, —and aspiration immediately above the pubes. The latter treatment is certainly easy, and, as I think, safe. At any rate, the following case bears out that belief.

On Sept. 3d last I was called to see a patient, aged ninety, who was suffering from retention of forty-eight hours' duration, due to enlarged prostate. Of course, catheterization was the treatment indicated, and this was tried most carefully and perseveringly by Dr. McGuinness and myself with both silver and soft catheters ; but, partly by reason of the enlarged prostate and partly from numerous false passages, which made it almost impossible to keep the catheter in the urethra, all efforts to reach the bladder with catheters failed. Then, as it was an absolute necessity that immediate relief should be given, we decided to aspirate. That was done, and thirty-five ounces of urine were drawn off, the operation causing but little pain. On the following morning, as no ill effects were visible, it was decided to aspirate again, instead of trying the catheter, so that the urethra might recover itself, and the false passages heal, by rest. This was

done, and has been repeated daily for thirty-four days, all the attempts by several surgeons to catheterize during this time meeting with failure. On the 7th of October, however, I succeeded twice in passing a soft catheter. This patient, therefore—an old man of ninety—passed no water per urethram for five weeks, during which period he was aspirated thirty-four times, and has had neither cystitis nor peritonitis; the only discoverable ill effect being an inflammatory thickening about the seat of the numerous punctures.

This is the third case in which I have aspirated the bladder: one case being a stricture, with acute gonorrhœa; the other, calculus impacted in the urethra. In neither of these cases, however, was it necessary to operate more than once. I have never found any ill consequence arise from the operation, and I cannot see what advantage the old method of puncture through the rectum possesses over it. It would certainly have been impossible to have repeated this latter proceeding thirty-four times.—*London Lancet*, Aug. 29th.

Retention of Urine—Ung. Nux Vom.—Dr. Malley recommends an ointment made of one part extract of nux vomica to ten of lard in the treatment of functional retention of urine. A piece the size of the thumb-nail is to be rubbed on the hypogastrium once or twice a day.—*N. Y. Med. Record*, Aug. 1st.

Supplementary Excretion of Uric Acid.—M. Boucheron, in a communication to the Paris Academy of Sciences, has called attention to the various forms in which uric acid is excreted in addition to the portion carried off by the renal passages, referring specially to the salivary, mucous, and digestive glands. He considers that glandular gout, and certain forms of nasal, bronchial, stomachic, and other catarrhs are manifestations of the supplementary excretions of uric acid being the most easily detected. The presence of a large quantity of uric acid in the saliva may be a premonitory symptom of uricæmic accidents, and a diagnostic sign of the nature of these accidents. The most convenient and rapid qualitative test for uric acid is the reaction of murexide. This reddish-purple coloration can be obtained by causing the successive reaction of the vapors of anotic acid and ammonia upon a few drops of saliva slowly dried in a porcelain capsule by means of a water-bath.—*London Lancet*, Aug. 15th.

Electric Light in the Surgery of the Bladder and Rectum.—A. W. Mayo Robson, F.R.C.S., honorary surgeon to the Leeds General Infirmary, gives the following notes on the advantages of a portable electric lamp in operations in the bladder and rectum. A. S ——, aged fifty-four, living near Scarborough, who had suffered for three years from hæmaturia and other symptoms of tumor of the bladder, came to Leeds to consult me. I told her that I suspected tumor of the bladder, but could not positively say until I had dilated the urethra and carefully explored the viscus. She consented to have this done, but asked me to perform no extensive operation without further consulting her. On June 11th, under ether, I dilated the urethra by means of Weiss's dilator, and passed my index finger into the bladder, when it impinged on a hard, flattened, and nodulated tumor attached to the back part of the bladder, close to the entrance of the left ureter, by a base of quite an inch and a half. I now passed in a small half-candle Swann's electric lamp fixed to a long slender handle and connected to a Faure's storage battery, thus illuminating the interior of the bladder, exposing the tumor, and showing me a bleeding surface, to which I was enabled to exactly apply a strong perchloride-of-iron solution. Feeling that I could with some difficulty remove the tumor, but not without considerable risk to the patient, I explained the matter fully to her and her friends, who decided not to have any further operation performed, as I could not promise them that the growth, which I believed to be epithelioma, would not return. My patient was much relieved of her hemorrhage, had no constitutional symptoms, and did not suffer from incontinence, the next night only having to pass urine once. She was enabled to return home after a short time, apparently relieved.

In a case of rather extensive internal hemorrhoids which I had removed by the clamp and cautery, I noticed a little bright-red blood trickling from the anus just before the patient was being removed from the operating-table, and on dilating the rectum found that there had been considerable hemorrhage into the bowel. I ligatured several oozing points, but as the

bleeding continued I inserted my electric lamp and at once lit up the site of operation, revealing a pumping artery more than an inch from the anus, after the ligature of which there was no more trouble. My small battery is quite portable, and can be used either for the light or for a small cautery ; it can be carried in an ordinary instrument bag, and when it is exhausted is soon recharged by being connected to a fixed chromic-acid battery.—*London Lancet*, Aug. 22d.

Cystitis.—The prevention of decomposition is the most important matter in the treatment of cystitis. Decomposition of the urine increases the vesical inflammation by augmenting the irritation, and the more muco-pus is secreted the more favorable are the conditions for septic organisms. It is the vicious circle once more. The proposal of Rossbach to use naphthaline should receive careful and practical attention. According to him, one or two grains of this substance had a remarkable effect on a severe case of vesical catarrh, so that the decomposition of the urine was arrested in from two to three days. In less severe cases one or two days suffice to effect a complete cure. Even in tubercular disease of the urinary passages, complicated by disease of the lungs, the daily administration of five grains of naphthaline produced a notable diminution in the number of bacteria, as well as in the amount of deposit, and the sufferings of the patient were lessened.—*London Lancet*, Aug. 22d.

Painless Method of Introducing the Catheter.—Dr. John A. Stamps recommends the following as an almost painless method of introducing the catheter when there is a hyperæsthetic condition of the urethra. His plan consists in introducing the nozzle of an ordinary male urethral syringe, previously filled with water as warm as the patient can bear, into a soft catheter, and injecting the water slowly as the catheter is gently passed along the urethral canal. The water regurgitates between the catheter and the urethral wall until the catheter has reached the prostatic portion of the urethra, and there is thus little danger of much water passing into he bladder, and the warmth of the water will, in many cases, serve to allay irritability, which so often interferes with the performance of catheterization—*Med. and Surg. Rep.*

Detection of Small Quantities of Sugar in Urine.—When urine containing less than 1 per cent. of sugar is heated with Fehling's solution, it becomes opalescent and greenish, or dark yellow, in color, but does not deposit cuprous oxide. According to G. Buchner, this is due to the presence of uric acid and creatinine, which should be removed, by first adding to the urine a solution of copper sulphate, 1 to 10, then warming and filtering from the precipitate. The filtrate containing excess of sulphate of copper is next treated with Rochelle salt and potash solution, and warmed. Under these conditions the smallest quantity of sugar is indicated by the precipitation of red cuprous oxide.—(*Chem. Centralblatt.*) *London Med. Times*, Aug. 15th.

Chronic Atony of Bladder. — P. Donovan, F.R.C.S.I., Kingstown, writes : In answer to the inquiry of "Old Member," as to the treatment of chronic atony of the bladder, I would recommend him to pass an electric current each day for a period of five minutes, from a Stohrer's battery, from the sacrum to the pubis, and along the perinæum, and to try the following mixture at the same time, with the cold sitz bath, or, better still, sea bathing every morning : ℞ Tinct. ferri perchloridi, ʒ ii.; liquor strychniæ, *P.B.*, ʒ ss. ; liquor ergotæ, *P.B.*, ʒ ii. ; syrupi limonis, ℥ i. ; aquam ad ℥ viii. One ounce to be taken twice daily.

I have lately had a gentleman under my care, who had lost all power over his bladder, and had to be relieved two or three times each day by the catheter. He is now perfectly well, with full power over the organ, although he is seventy-eight years of age. The above treatment in this case was most successful.—*Brit. Med. Jour.*, Aug. 22d.

Urethral Caruncle — Cocaine.—Percy Boulton, M.D., London, writes : I find, in cases of "urethral caruncle" (those exquisitely sensitive growths of the female urethra), that the effect of cocaine is marvellous. Few small troubles are more sensitive to touch, and formerly it was necessary to give chloroform for their removal. I now apply a four-per-cent. solution of cocaine, and in five minutes snip them off with sharp scissors, and apply the cautery to the stump to stop bleeding, without chloroform, and without pain to the patient. The same solution, if applied in the nostrils with a camel's-hair brush, undoubtedly produces

great relief in cases of hay-fever.—*British Med. Jour.*, July 25th.

Urethral Ointment for Gonorrhœa.—Unna (*Dtsch. Med.-Ztg.*) recommends the frequent introduction of a sound smeared with the following :

℞	Nitrate of silver . .	30 grains.
	Peruvian balsam .	60 grains.
	Yellow wax . . .	1 to 2 drachms.
	Cocoa butter . . .	6 ounces.

Pills for Spermatorrhœa.—De Sinéty (*Union méd.*) proposes the following :

℞	Extract of belladonna . . .	3 grs.
	Powdered belladonna root .. .	3 grs.
	Confection of rose	q. s.

Divide into ten pills. One to three pills should be taken before going to bed.

—*Med. Bulletin*, Aug.

VENEREAL.

Treatment of Venereal Diseases in New York. — A correspondent writing from New York says :

We will now pass into the venereal ward, not, however, so much for the purpose of learning the signs, symptoms, and pathology of venereal diseases (for there has been little change in the teaching on those points), as to acquire a knowledge of the latest and most approved methods of treatment. As far as I can learn, more importance is attached to irrigation of the urethra than to any other remedy for gonorrhœa. A bottle, containing a gallon of warm water, is placed near and slightly above the patient. A catheter (about No. 6 in size) is introduced to the membranous portion of the urethra. To this instrument a tube passing from the faucet of the bottle is attached, and the water is allowed to run *ad libitum*. I think that the longer this is kept up and the oftener it is performed, the more sure and speedy will be the cure. Chancroids are, as of yore, cauterized and dressed with iodoform. The chancre of syphilis is simply kept clean and dusted with calomel, and if the sore heals kindly no internal remedies, save such as might be indicated to put the patient's system in good condition to resist the disease, are used until other symptoms present themselves, and then the favorite remedy is the famous "pil. duo," which consists of one gr. of sulphate of iron and two of blue mass, given three times a day. When, again, these symptoms have subsided the medicine is dropped. To make a long story short, instead of two years of mercury the symptoms alone are treated. There is much logic in this plan of dealing with syphilis, but all will admit that it is easier to carry it out in the hospital than in private practice, especially when it is known that the much-dreaded rash may be prevented or masked by continuous treatment from the date of the initial lesion.—*Canada Med. Record.*

Treatment of Acute Gonorrhœal Orchitis by the Application of Clay.—The white clay used by modellers is made into a soft paste with water. The paste is spread to about the thickness of one's finger on a square piece of linen. An assistant then raises the scrotum while the surgeon applies the dressing, which ought to cover the whole of the affected half of the scrotum as far as the root of the penis. Slight pressure is applied so that the clay may be adapted perfectly to the affected organ. The patient remains in bed wearing a suspender and with the thighs apart. As the paste retains moisture for a long time it is only necessary to renew the dressing morning and evening. The author states that the acuteness of the pain subsides in ten minutes after the application of the dressing and very soon pain disappears altogether. In two or three days the testis begins to diminish in size. The applications are to be continued for five or six days. Dr. Loucachevitch states that he has treated twenty-six cases by this means alone, and that recovery has always been rapid. —*London Med. Record.*

Histology of Syphilitic Lesions.—Twelve colored plates illustrate a fresh microscopical investigation into the histology of syphilitic lesions, by Isidor Neumann, the results of which are published in the *Vierteljahr. für Dermatologie und Syphilis.* We shall give here a brief *résumé* of the paper in question. Cutaneous syphilides are due to the overgrowth of small round cells in the immediate neighborhood of vessels. The vessels of the upper layers of the cutis and papillæ are chiefly affected, but the vessels of the deeper layers of the cutis (arteries and veins) are also involved. The intensity of the morbid changes in recent maculæ is slight, but increase visibly as we pass on to papular, tubercular, and gummatous lesions. The morbid products in the macular

forms are limited to the papillæ of the cutis, the epidermis not being involved. As the overgrowth of round cells goes on, the limits of the papillæ are transgressed and the rete becomes infiltrated, whilst the cuticle becomes tightly raised over the subjacent swollen rete. The exudation consists at first of round cells, but later on the cells take on a spindle shape, as may be well seen at the outer limit of the vessel. Pigment is chiefly found in the form of granules of various sizes, and varying in color from orange to brown. The granules lie partly in the exudation and partly in the connective-tissue cells. In the former case, resorption takes place readily, but not so in the latter. If the exudation has affected the rete, then this structure is also pigmented. The bundles of connective tissue of the papillæ appear to be swollen and spongy. This swelling may also be seen in the deeper layers of the cutis when gummata form. The hair follicles are altered in several ways. The hair sac may not only be surrounded by newly-formed cells, but may be actually thickened by an invasion of its proper substance. Clavate, lichenoid, and acneform outgrowths and cystic dilatations may thus be formed. The same changes have been observed in the sebaceous glands. Giant cells were found in tubercular, lichenoid, and acneform syphilitic eruptions, as well as in cutaneous gummata. They were not detected in macular, recent lenticular syphilides, or in any of the primary forms. Isolated tissues of the skin, such as smooth muscular fibres, appear to offer some resistance to the disease. In individual sections round cells were found running in the course of the vessels of the arrectores, whilst in papules of the scrotum there was no infiltration of the abundant muscle fibre. An important point to bear in mind is the persistence of anatomical changes, even after all trace of them has disappeared so far as clinical examination can discover.—*London Lancet*, Aug. 8th.

Tannate of Mercury for Syphilis.—Cumulative evidence goes on to show that the most eligible form of mercurial for the treatment of syphilis, according to Leblond, Lustgarten, and Kaposi, is the tannate, containing fifty per cent. of the metal.

℞ Hydrargyri tannat., (3 g.) . gr. xlv.
Ext. et pulv. glycyrrhizæ . q. s. M.

SIG.—Make sixty pills, and take from four to eight daily.

This form of mercurial does not disturb digestion, and has been found most efficient.—(*Revue médicale de Louvain*) *Phil. Med. Times*, Aug. 8th.

Chancroid.—Zeissl, in his description of the chancroid, says: Inoculability is the only test; without, however, being absolute, it is only a means of facilitating diagnosis; but this means is of value only to a certain degree, since it is admitted that any pus is inoculable when placed beneath the skin or upon a surface denuded of the epiderm, and may produce an ulcer, which differs in that it is not so rapid in its formation as that assumed by pus from an ulcer which, by its history, is regaded as a soft, venereal sore.—(*Annales de dermatologie et de syphiligraphie*) *Cin. Lan. and Clin.*, Aug. 29th.

Tertiary Syphilis.—Professor Brinton has found many obstinate cases of tertiary syphilis become amenable to treatment and rapidly improve when placed on the following formula:

℞ Potassii iodidi . . . . . ʒ iij.
Iodine . . . . . ʒ j.
Hydrarg. bichlor. . . . . gr. ij.
Aqua . . . . . ʒ iij.

M. SIG.—One teaspoonful three times a day.

—*Med. Bulletin*, Aug.

Powder for Phagedenic Chancre.—M. Terrillon recommends the following powder as usful in phagedenic chancre:

℞ Acid. pyrogallici . . . . . ʒ v.
Pulv. amyli . . . . . ʒ iss. M.

SIG.—Mix carefully.

In phagedenic anfractuous chancres, insufflate the powder into the depths of the sore. The dressing should be applied twice daily. The preparation employed should be fresh, and preserved from moisture in a well-corked bottle.—(*L'Union méd.*) *Phila. Med. News*, Aug. 1st.

Iodoform in Gonorrhœa.—Dr. A. Oger (*Journal de médecine de Paris*), in discussing the use of iodoform in gonorrhœa, refers to its use in solution of glycerine, by M. Campana, in acute and chronic conditions of the disease.

The best results are attained, however, when it is applied to the diseased parts in a very fine powder. In this form Timmermans has obtained excellent results. Iodoform being insoluble in water, he suspends in two and one half ounces of water sixty grains of the drug, rendered impalpable by

previous solution in sulphuric ether. The mixture being well shaken, a small glass syringe is filled and injection practised.—*Cin. Lan. and Clinic*, Aug. 29th.

OPHTHALMIC.

Penetration of the Eyeball with Scissors in the Operation for Strabismus.—Dr. H. Derby, of Boston, read a paper on two cases at the late session of the Amer. Ophth. Soc.

The first case was that of a young man on whom an operation for strabismus had been attempted. The surgeon inadvertently picked up a pair of sharp-pointed scissors. The point of the scissors suddenly penetrated the eyeball, and a portion of vitreous equal in size to a cherry-stone escaped. The operation was abandoned, and Dr. Derby was called to see the case. The eye was bandaged, and the patient put to bed. Several attacks of inflammation supervened, but the patient was discharged on the forty-first day with $V = \frac{7}{10}$.

In the second case the scissors also entered the sclerotic, but after a somewhat tedious convalescence the wound was found closed on the twenty-first day with vision as good as before the operation.

Dr. Knapp stated that he had done three thousand squint operations, and in three cases he had punctured the sclerotic. He, however, completed the division of the muscle, and the patients recovered as readily as from an uncomplicated operation.

Dr. Mittendorf stated that he had been present at a strabismus operation where the sclera was opened. He advised the surgeon to complete the operation. This was done, and the wound had healed in four or five days. He thought that, in case the accident happened, the division of the muscle should be completed.

Dr. E. Williams, of Cincinnati, reported a case in which he had punctured the eye. The patient recovered without difficulty.—*N. Y. Med. Record*, Aug. 15th.

Purulent Conjunctivitis.—Dr. J. A. Andrews, New York, read a paper on its treatment at Amer. Ophth. Soc. The treatment is based upon the belief that the contagious element is of the micrococcus variety. He related a case in which he had secured an inoculation of the seventh generation of a pure culture of a gonococcus. This is the first case inoculated with the gonococcus. He showed an instrument which he had devised to wash out the conjunctival cul-de-sac. It consisted of an eye-speculum with hollow arms, through which fluid may be passed. He had found bichloride-of-mercury solution (1 to 10,000) serviceable, but apt to irritate. A six-per-cent. solution of boric acid was also found efficient. A two-per-cent. solution of carbolic acid is useful, as it inhibits the movements of the white corpuscles. Irrigation should be maintained for ten minutes, in order to remove all secretion. Nitrate-of-silver solution (two to twelve per cent.) is then used, and an antiseptic dressing is next applied. This consists of vaseline and boric acid or carbolic acid; but he laid especial stress upon the importance of maintaining irrigation of the conjunctiva by means of the instrument referred to above.—*Phila. Med. Times*, Aug. 8th.

Nævus Cured by Electrolysis.—M. Leplat has recently shown, at a meeting of the Medico-Chirurgical Society at Liège, a girl eight years of age, who had been admitted into the hospital for a large nævus, occupying the left temple, the whole lower eyelid of the same side, and the external third of the upper lid. The tumor was bluish, and increased in size when the jugular vein was compressed; its thickness varied from four to ten millimetres, and pulsation could be detected at several points. Dr. Leplat introduced under the skin covering the tumor two steel needles, which were put into communication with a battery of from twenty to thirty cells, and left in place for a few minutes. The operation was repeated forty-nine times, and at the end of six months the upper lid was nearly normal in appearance. The lower lid and skin of the temple had become much thinner, but they were covered with small, depressed scars; those produced by the negative poles were white, the others reddish-brown. The discoloration of the skin might be prevented by the use of a platinum needle.—*British Med. Jour.*

Double Optic Neuritis and Ophthalmoplegia from Lead Poisoning Complicated with Typhoid Fever.—Dr. O. F. Wadsworth reported to the Amer. Ophth. Soc. the case of a boy nine years of age who had suffered from obscure febrile symptoms for several weeks, and move-

ments of the left eye had been observed to be imperfect. When first seen by Dr. Wadsworth there was pronounced optic neuritis in both eyes. The rest of the fundus was normal. Vision was much diminished. No lateral movements of the left eye could be made, and movement downward was impaired. The outward movement of the right eye was defective. The probable diagnosis was tumor in the region of the pons.

The movements of the eyes became still more impaired and vision sank. The boy developed distinct symptoms of typhoid fever. The spleen and liver were both enlarged. Lead was found in the urine, and the diagnosis of tumor was then abandoned. The treatment was with iodide of potassium. The general condition gradually improved ; the neuritis passed into atrophy, leaving too little vision to count fingers. The movements of the eyes were completely restored, and the lead disappeared from the urine. The cause of the lead-poisoning was found to be the presence of a piece of lead pipe in the cistern from which the drinking-water was obtained.—*N. Y. Med. Jour.*, Aug. 1st.

Cautery in Destructive Corneal Processes.—At the Amer. Ophth. Soc. Dr. H. Knapp cited a number of cases in which its use had been of service and considered it a valuable measure.

Dr. Howe had employed this measure in three cases and the corneal ulcer had been somewhat lessened.

Dr. E. Williams, of Cincinnati, had for the past fifteen years been in the habit of treating phlyctenular ulcers of the cornea by the application of pure carbolic acid and had found it to act admirably.

Dr. O. F. Wadsworth, had for several years been in the habit of using carbolic acid for ulcus cornea serpens and for sluggish, painful infiltrations of the cornea. In sluggish infiltration the application is preceded by scraping and in some cases the simple scraping had been sufficient. When the ulcus cornea serpens had been severe, he did not recall that it had entirely stopped the process. In a recent case in which the acid was applied at the beginning of the affection, three applications checked the disease.—*N. Y. Med. Record*, Aug. 15th.

Quinine Amaurosis.—Dr. E. Williams reported two cases to the Amer. Ophth. Soc. In the first case a man took about one ounce in the course of four days. This produced total blindness and deafness, but in six weeks he could see as well as ever. The hearing had never completely returned, although the quinine was taken eight years ago. The field of vision was concentrically contracted in both eyes. The optic discs were very white, the calibre of the arteries and veins was reduced, and the smaller capillaries could not be seen.

The second case was that of a boy of fourteen, who had received large doses of quinine, the exact amount not being known. He was totally blind for four days. When examined, the sight was much diminished, the atrophy of the optic discs was extreme, and there was great contraction of the field of vision.—*Phila. Med. Times*, Aug. 8th.

Tumors of the Orbit.—At the last meeting of the Amer. Ophth. Soc., Dr. B. E. Fryer, Kansas City, Mo., reported the case of a boy, six years of age, under observation, April, 1885. There was swelling of left orbit, which included the whole line of the superciliary ridge. It was quite hard. Some time before, the boy had been struck by a piece of wood, but it was thought that no splinter had lodged beneath the skin. It was decided to remove the tumor. This was done, and on examination it proved to be a bony cyst, within which was a small piece of wood. This was enclosed in bone on all sides. The edges of the wound were brought together, and healing resulted without complication.

Dr. W. H. Carmalt, of New Haven, Connecticut, reported the case of a child ten years of age, from whom he removed a small growth from the upper lid. Six weeks later the growth had returned. An exploratory operation was done, and it was found that the growth extended into the orbit, and that it was impossible to remove it entirely. It was therefore decided not to complete the operation. The child had since died. The tumor proved to be a rapidly growing sarcoma. He thought that if in young children the tumor appears to be quickly recurrent and not easily isolated, no operative interference should be attempted.

Dr. Harlan, of Philadelphia, reported several instances of inflammatory exudations in the orbit simulating tumors, and illustrating the importance of exercising great care in diagnosis.—*Phila. Med. Times*, Aug. 8th.

Ointment in Ulcer of the Cornea.—Galezowski recommends an ointment as follows in the treatment of ulcerated cornea :

℞ Iodoformi pulverati . gr. xv.–xxx.
Vaselini puri . . . ʒ iiss.
Mix carefully.

The ointment is useful in herpetic and scrofulous ulcers of the cornea. It acts also favorably in ulcers appearing in syphilitic subjects. It may be used several times during the day. In addition, a collyrium of pilocarpine and douches of carbolized spray are also beneficial, used fifteen or twenty days. The ulcer is filled up by new tissue, and cicatrization gradually progresses.—(*L' Union méd.*) *Phila. Med. News*, Aug. 15th.

AURAL.

Sexual Deafness and Defective Sight.—Dr. G. De G. Griffith, London, writes : I was astonished to read in your issue for July 8th the statement of "An Obstetrician," that there is a growing opinion that, under the guise of gynæcology, much *demoralizing* and unprofessional conduct is carried on, since I thought otherwise, and that obstetricians and gynæcologists had begun to take a foremost position in the profession. I am a specialist—a gynæcologist,—but I don't "spay" nor practise os-splitting, though I have no small practice, and have had no small experience. The paragraph in your correspondent's letter to which I wish particularly to direct attention is the following : "Every one has heard of the case of an unfortunate lady who in one of our large Scotch cities slipped by accident into the house of a gynæcologist instead of that of his neighbor the aurist, and was there treated for deafness for six months *through a vaginal speculum*." Surely the writer, if an obstetrician and a gynæcologist, would not join in the laugh at the recital of such a story—a story true as regards the cure which might be effected, true as regards successful treatment in the way the writer despises, if not true as to the occurrence of the accident.

Since the days of Marshall Hall we have become accustomed to the study of reflex action and reflex irritability and irritation. The admirable papers by Dr. Routh "On the Constitutional Treatment of the Uterus and its Appendages," lately published in your pages, vividly portrayed some phases of this reflex action—and what obstetrician, what gynæcologist, is unfamiliar with the Proteans of these reflexes ? Toothache in one or many teeth ; sore throat as a sexual reflex ; eye affections of various kinds—I will not here stay to enumerate them,—and defects of sight from utero-ovarian irritation. Every honest-minded and well-educated oculist and aurist must be familiar with such cases, almost as familiar, I should say, as his equally honest and well-educated brother in the profession—the obstetrician or gynæcologist. I could quote many cases occurring in my own practice corroborative of my statements. I will name one. Mrs. Ch—— came to me with utero-ovarian irritation. She complained, likewise, that her sight had been decidedly growing more and more defective—that she was becoming more and more near-sighted. Without telling me she went to one of our famous oculists. He examined her eyes, asking under whose care she was, and for what. She told him, and his answer was : "You had better continue under his treatment ; he can do more for you than I could." She continued the local utero-ovarian treatment, was quite cured, and the sight was restored also. The cases of deafness are equally well marked ; and absurd as it evidently appears to be in the eyes of your correspondent, nevertheless it *is* a fact that "deafness" may best be "treated through the vaginal speculum," *i. e.*, by attending to the sexual organs, both through the vaginal speculum and without it in other ways. Here is the last case in point which has occurred in my practice : Mrs. K. came to me complaining of being almost "stone deaf." I had to put my lips quite close to her ears and shout loudly before she could at all make out any of my words, so deaf was she. For years she had not entered a place of worship, and had had to withdraw from society because of her infirmity. There was also great general nervousness, such as we find existing in such sexual cases. I examined the ears, but found nothing wrong. I then asked her gynæcologic questions. Her answers led me at once to infer sexual deafness was what was present. I found the uterus tender, enlarged, engorged, and severe retroflexion existing. Positively I treated her deafness through, not the ear speculum, but the vaginal, by scarifying and punctating, etc. This done, I reduced

the displacement, and placed a suitable pessary. Her deafness was soon better, and now she is able, as she and my class of pupils can testify, to hear me from the opposite end of a medium-sized room (consulting-room of our hospital) when I speak to her in my ordinary voice. So much for treating deafness *through the vaginal speculum and per vaginam.*

I exhibited this patient to my class of ladies the week before your correspondent's letter appeared, and she is to the front still to bear me out. I shall be happy to show her to any scientific inquirer. Other cases I could likewise adduce. Indeed, I have often in my lectures pointed out that what is throat deafness and nervous deafness is really in many instances but sexual deafness—that is, deafness proceeding altogether from disturbed conditions of the sexual system. Persistent and repeated sore-throats in young girls should at once cause the medical attendant to make inquiries as to the working of the sexual organs. Almost invariably he will find in them the cause of the throat affection, and often the concomitant "throat deafness" which in many instances may be present; and I have long been in the habit of teaching that these cases are only relieved permanently, or cured, by the girls getting married and *becoming mothers;* and "becoming mothers," I always add, for in the majority of cases marriage will not cure, though child-bearing will in most cases. It is true that advancing years, if they bring quiescence to the sexual organs, will, without marriage having been contracted, and without child-bearing having taken place, bring in their train a cessation to the throat troubles—the results of the sexual reflex irritation and disturbance. But often the deafness will be permanent, simply because the remedy has not been adopted in time, and what was once but a functional disarrangement has been allowed to pass into organic change, and what was before only a symptom has been permitted to become a veritable diseased state of the auditory apparatus, permanent and irremediable deafness being the result.—*London Med. News*, July 22d.

Loss of Hearing from Mumps.—Kipp (*Arch. Otol.*) reports one case of this disease, in a young man aged eighteen, in which the total loss of hearing was in the right ear only, which was first noticed fifteen days after the commencement of an attack of mumps, while the patient was suffering from a metastatic inflammation of the left testicle. As all signs of irritation of the acoustic nerve was absent, it seems highly probable that the disease was limited to the cochlea. Whether the morbid process here was an inflammation with serous or hemorrhagic effusion or embolism of the cochlear artery, it is difficult to say. Kipp thinks that an extension of the disease from the parotid gland to the ear along the facial nerve, or through the external canal and tympanic cavity, seems highly improbable; he thinks it much more likely that the inflammation of the parotid, the orchitis, and the ear affection are merely local expressions of the same morbid condition of the blood. Another case was similar to the first, except that there was no orchitis.—*N. Y. Med. Jour.*, Aug. 22d.

Reflex Cough Due to Irritation of the Auditory Meatus. — Dr. H. W. Gradle, Chicago, says: "It is well known that irritation of the walls of the meatus will produce cough in many persons. The continued occurrence of this reflex was illustrated by the case of a young man who had had a cough for four months, coming on sometimes in distressing paroxysms, which several physicians had failed to remove, so that he had resolved to cease all treatment. An eczema of the meatus, which he supposed to have been there for several months, but to which he had not paid any attention, had lately spread further along the auricle, for which annoyance he called on me. After a single application of a strong solution of nitrate of silver to the well-denuded and scraped eczematous surface, his coughing fits never returned, and the slight bronchial irritation, which accompanied the trouble, disappeared during the next few days of treatment of the eczema. This cure was permanent, as I learned six weeks later. In another instance, a spasmodic cough in a child, the nocturnal attacks of which had kept the parents in a state of alarm for three weeks, was removed by taking a plug of exfoliated epithelial scales out of the auditory meatus."—*Med. Bulletin*, Aug.

Chiselling of the Mastoid Process.—Hartmann (*Arch. Otol.*) reports in detail the histories of fourteen cases in which it was necessary to open the mastoid process, and lays down rules for the performance of

the operation. The incision in the skin and the opening in the bone should be practised at the line of attachment of the auricle, or at least immediately behind it. The possibility should always be borne in mind that in operating we may chance upon a sharp curve of the transverse sinus. The skin incision and the bony canal should be made so large that a free inspection of the wound cavity may be possible during the after-treatment. In order to keep the wound open, rubber tubes should be inserted immediately after the operation, to be replaced subsequently by thick and still later by thin lead ones.—*N. Y. Med. Jour.*, Aug. 22d.

Sea Baths as a Cause of Ear Disease.—F. Bobone, in a research into the causation of ear disease by sea baths, gives the following résumé of his conclusions :

1. Sea baths are sometimes the cause of serious disease of the ear.

2. The disease is usually occasioned by the entrance of water into the external auditory meatus, and is found in those persons who dive or plunge under water.

3. Among the affections so caused, external otitis and tympanitis predominate.

4. Purulent otitis of the middle ear is also frequently met with as a result of sea baths, but frequently is secondary to the tympanitis.

5. Purulent otitis of the middle ear as a result of entrance of water into the tympanum through the Eustachian tubes, is of extreme rarity.

6. Diving and plunging under water is useless and dangerous, and the practice should be deprecated to bathers, especially to those whose ears are already diseased.

7. Syringing the external auditory canal with sea water, a procedure still recommended by some practitioners, is irrational and far more productive of evil than of good.

8. A pledget of cotton in either ear previous to entering the water will prevent much of the danger to hearing resulting from the entrance of sea water into the auditory apparatus.—(*Gazzetta degli Ospitali*) *Phila. Med. News*, Aug. 15th.

Two Rare Cases of Mechanical Injury to the Organ of Hearing.—Moos (*Arch. of Otol.*) reports a case of bilateral labyrinthine disease in a man, aged twenty-six, which was developed fifteen minutes after a stay of thirty hours in a diving apparatus. It manifested itself by nearly total deafness in both ears, tinnitus aurium, and vertigo, followed by staggering gait, and inability to stand without support. It was caused by suddenly leaving the diving apparatus, after working in it, under a pressure of two atmospheres, with but short intermission, for thirty hours. These symptoms were probably the result of a hemorrhage in the labyrinth. The second case was in a man, aged thirty-four, in whom both drum-membranes were ruptured by the compression of air produced by the explosion of chlorophthallic ether during the making of eosine.—*N. Y. Med. Record*, Aug. 22d.

Tinnitus—Ergotin and Quinine.—Ergotin given in doses of sixteen grains will neutralize the cerebral effects of fifteen grains of quinine. Tinnitus may be entirely avoided by combining these two remedies.—*N. Y. Med. Times*, Aug.

DERMAL.

Lymphodermia Perniciosa.—Under this title Professor Kaposi, of Vienna, has lately described in detail a case of what he believes to be a hitherto undescribed form of skin disease. A widow, aged thirty-nine, had suffered for more than a year from an eruption, which passed at first for a universal chronic eczema. On admission to hospital the face and hands were chiefly affected, but the skin of the scalp, forehead, face, ears, and neck was of a diffuse brownish-red color, thickened, desquamating, and with honey-like crusts here and there. In the clavicular regions, upper part of chest, and axillæ, the submammary folds were reddened more or less, and desquamating or oozing. On the abdomen and back were similar patches. The extensor aspect of the upper limbs was the seat of a certain degree of desquamation, and the skin of the wrists and hands was thickened, scaly, cracked, and oozing in places, whilst the inferior extremities were less affected. The inguinal and cervical glands were swollen to the size of nuts, and firm. No visceral disease was detected, and the temperature was normal, but violent itching accompanied the eruption. On the left thenar eminence and the flexor aspect of the forearms were to be felt in the subcutaneous tissue several firm nodules, in size from a pea to a pigeon's

egg, fairly well circumscribed. From her admission till six months later, when the woman suddenly died after an acute paralysis of the left inferior extremity the day before, the nodosites steadily increased in number in the deep cutaneous and the subcutaneous tissue of the flexor aspect of the forearms, breasts, epigastrium, abdomen, face, etc. They softened and ulcerated through and became covered with crusts. The face became enormously swollen and leontiasic, and the ears stood out from the head. The spleen soon became enlarged, and a serous infiltration of the skin set in with ascites. The lymphatic glands became involved, and a progressive diminution of red-blood corpuscles was traced. At the necropsy the spleen was four times its normal size, the liver voluminous; some small nodosites were found in the lungs and beneath the pleura, and the medulla of the bones seems to have been affected. The skin and lung tumors were all of the same character, and the former apparently originated near fat-lobules. They were composed of a delicate fibrillar stroma, deprived of vessels, with connective-tissue corpuscles poor in protoplasm in places where cells, resembling lymph cells, and lymphoid nuclei occurred aggregated in extremely dense masses free in the intercellular spaces. Professor Kaposi refers shortly to cases described as *lymphadenie cutanée* by French authors, which have been described, if we remember rightly, as preceded by eczema, but he refuses to acknowledge the identity of the affections. — *London Lancet*, Aug. 29th.

Electrolysis for the Removal of Superfluous Hairs.—George H. Rohé, M.D., Professor of Hygiene and Clinical Dermatology, College of Physicians and Surgeons, Baltimore, writes:

Electrolysis has been most frequently used for the permanent removal of superfluous hairs. In addition to the appliances to be presently mentioned, the operator who attempts to treat a case of hirsuties by this method needs a steady hand, clear vision, and above all an abundant stock of patience. Without these three requisites, no one should undertake the treatment of such cases.

The battery used should furnish an evenly-acting current of moderate power. I have used both the Flemming and McIntosh batteries with comfort, and with satisfactory results. For the last two years I have employed the latter exclusively, using a current of from six to twelve cells.

The electrodes consists of one ordinary sponge electrode attached to the positive pole and held in the patient's hand. This is used to make and break the circuit. The electrode attached to the negative pole consists of a fine needle in an insulated handle. The handle I now use is of wood, with a brass rod passing through its centre and small binding screws at each end for the purpose of holding the needle and of fastening the handle to the conducting wire-cord. The handle is made pretty thick, so as to enable it to be held firmly. A very thin ivory handle, which I formerly used, cannot be held as steadily as the thicker one.

The best needle I have used is one made by A. M. Leslie & Co., of St. Louis, for my friend Dr. Hardaway, of that city. It is made of a composition of platinum and iridium, is very fine, smooth, and flexible, and does not break easily. I have tried the finest obtainable steel needles and dentists' and jewellers' "bristles," but with much less satisfaction than the platinum-iridium needle referred to.

A chair with a head-rest—an ordinary dentist's or oculist's chair—is absolutely essential to steady the head of the patient during the operation. For the greater comfort of both operator and patient, a reclining chair which can be fixed at any angle is decidedly better.

To proceed with the operation: The patient is placed before a good light—avoiding direct sunlight unless modified by frosted glass—and directed to take hold of the handle of the sponge electrode, the sponge, of course, having been previously moistened. The operator then sits a little in front of and to the right of the patient, and takes the needle electrode in his right hand, holding a pair of tweezers with flat, narrow jaws in his left. The needle is then gently insinuated into a follicle by the side of the hair until the bottom of the follicle is reached. This is manifested by a slight resistance to the onward passage of the needle. The patient is then directed to touch the sponge with the palm of the other hand, thus closing the circuit. The current will immediately pass and the electrolytic action be made manifest by a little frothing

around the needle. In some skins also a little wheal will be raised about the follicle. In from twenty to forty seconds the hair can be extracted with the tweezers without the slightest resistance or pain. If the hair does not come away with perfect ease, the papilla has not been destroyed, and the needle should be permitted to remain and the current to pass a little longer. The current is broken by removing the hand from the sponge electrode. This gives less pain than if the current is closed and opened with the needle.

If the hairs are very close together, they should not all be removed at the same time. The hairs should be picked out here and there; otherwise the points of irritation will be in too close proximity, and, if sufficiently intense, may produce small areas of sloughing and leave scars. If the operation is properly performed, no visible scars should remain.

A sitting may last from fifteen to thirty minutes. Very few operators can extend it beyond the latter time. The sittings may be repeated every other day, or, in cases where time is important, every day. After the operation a lotion containing a drachm of oxide of zinc and two drachms of glycerin in two ounces of rose-water should be applied. It covers the redness of the skin and relieves the irritation, which is sometimes considerable.—*Phila. Med. Times*, Aug. 8th.

Treatment of Eczema in Regions Covered with Hair.—Taking the scalp as a region—for which the directions laid down may be generalized in the treatment of eczema of hairy parts—it is recommended that the head at first should be thoroughly washed two or three times with soap, in order to ensure the cleanliness of the affected parts. After this has been done, daily applications of the following preparation should be made:

℞	Acid. salicylici	gr. x.
	Tr. benzoini	gtt. xx.
	Vaselini	℥ j. M.

If a topical application is desired, which will more readily dry the parts, the following is recommended:

℞	Acidi salicylici	gr. xv.
	Amyli,	
	Zinci oxidi	āā ʒ iv.
	Vaselini	℥ j. M.

—(*Jour. de méd. de Paris*) *Phila. Med. News*, Aug. 22d.

Leprosy with Invasion of the Tongue.—Dr. Campana reports the case of a youth, aged fifteen, of leprous parents, who had tubercles and macules of leprosy on the face and legs. The tongue was also involved, the disease there being manifested by little papilliform tumors grouped together in an oval patch the size of a cent, slightly raised and with roughened surface. These little tumors varied in size from that of a lentil to that of a hemp-seed. Some were conical in shape, others rounded; they were red in color, and painless. One of these tumors was removed and examined under the microscope, when numerous bacilli characteristic of leprosy were found. —(*Revue médicale*) *N. Y. Med. Record*, Aug. 15th.

Freckles. — Freckles (ephelides) may be removed according to Halkin by the following method: After the skin has been thoroughly washed and dried, the spots are brushed over once with liquid carbolic acid by means of a small pencil brush which has been dipped into the solution and then expressed. The skin is stretched during this proceeding with the fingers of the left hand. It is then left to take its natural course, no washing or removal of the resulting cuticle being permitted. The skin finally regains its normal color.—(*D. Med.-Ztg.*) *Cin. Lan. and Clin.*, Aug. 15th.

Dry Treatment of Burns.—Dr. Géza Dulácska recommends that burns should be dressed with soda sprinkled on cotton-wool, bandaged to the wound. The pain may be severe for a short time, but it goes off in half an hour. In an hour the effect is quite perceptible, the reddened skin having regained its natural color, and the pain being gone. In three days the epidermis comes away, leaving a healthy corium below, without pain or suppuration.—*British Med. Jour.*, Aug.

Cold Hands and Feet.—Many people suffer from this trouble all their lives. They have difficulty in keeping the feet or hands warm in winter, and slight exposure to cold or mental excitement at once asphyxiates the extremities. These people generally suffer also from a palmar and plantar hyperidrosis. They constitute the class out of which the different forms of Raynaud's disease are drawn. Local and general exercise daily, hot pediluvia containing tr. capsici, general tonics, warm ab-

sorbing covering to hands and feet, are the therapeutic measures indicated. — *N. Y. Med. Record*, Aug. 15th.

Ulcers of the Leg.—Dr. Roberts has recently had excellent results in chronic ulcers of the legs, after sprinkling powdered chloride of sodium thickly over the surface of the ulcer, once every three or four days, and dressing the sores twice daily with corrosive-sublimate ointment. The ointment contains half a grain of the mercuric chloride to the ounce of cerate. Chronic ulcers with callous edges are often most expeditiously treated by the surgeon excising them by means of an elliptical incision, and closing the wound with sutures.

Face-Wash.—An excellent face-wash consists of a one-per-cent. solution of boric acid in rose water, with five-per-cent. of honey added.—*N. Y. Med. Record*, Aug. 15th.

TOXIC AND HYGIENIC.

Cremation in its Sanitary Aspects.—Dr. John O. Marble, of Worcester, read an interesting paper before the Mass. Med. Soc., from which we select the following paragraphs:

Wise sanitation is now universally regarded as essential to the public welfare. The health and safety of the people are believed to depend quite as much upon preventive medicine as upon curative.

So long as we live, the vital forces of nature are in operation. Immediately after death, however, the retrograde metamorphosis begins, which will surely render the body, perhaps now beautiful in death, a thing of horrible aversion and unwilling disgust.

The process of decomposition, decay, and putrescence goes on with varying degrees of rapidity, according to season, temperature, and moisture, till it becomes a menace to the living, however reluctantly we may admit the painful fact; and the disagreeableness of a fact is no evidence that it is not true, or that we can afford to ignore it.

By burying in the ground a body dead of any zymotic disease, we are planting for our descendants, seed, sure, sooner or later, to bring forth a horrible crop of pestilence and death! This can no longer be doubted, or the fact ignored, for it is incontrovertibly established on the concurrent testimony of the highest scientific authority.

Dr. Freire, of Rio de Janeiro, while investigating the cause of yellow fever, found that the soil of cemeteries wherein the victims of that disease were buried, was alive with microbian organisms identical with those found in the vomit and blood of patients who had died of it in the hospital. He took samples of the earth, one foot below the surface, over the remains of a victim of yellow fever, and found them swarming with the characteristic germs. He is therefore justified in characterizing the cemeteries as the nurseries of yellow fever, the perennial foci of that dreaded disease.

The greatest evil resulting from the inhumation of the dead is undoubtedly the contamination of water.

> "The rivers die into offensive pools,
> And, charged with putrid verdure, breathe a gross
> And mortal nuisance into all the air."

A well-recognized and, as I believe, not uncommon cause of typhoid fever is impure milk. The water for dairies appears to be of more importance than the supply of food (and I have no reference to the cupidity of the average milkman). I have personal knowledge of cases of enteric fever believed to have had their origin in milk produced by cows pastured near an old cemetery, the water which they drank being supplied by springs very near it. Thus even milk may not always be a safe beverage.

So well recognized is the fact of the danger of the poisoning of water by graves, that laws exist in France prohibiting the opening of wells within one hundred yards of any place of burial; and in some of the German states it is forbidden by law to dig wells nearer than three hundred yards to any grave; and at a hygienic council, held some time ago in Brussels, it was decided that the safe protective distance should not be less than four hundred yards. In our country I am not aware that any such laws exist.

The problem is, given a dead body, sure in a few days to become dangerous to the living, how shall we dispose of it reverently and with absolute safety to survivors, both now and hereafter forever. The answer is by fire, all-purifying fire, the element which when uncontrolled is no doubt the ruthless and destroying enemy of man, but when under control is his servant and friend. Indeed "the ethereal fire has been the most sacred symbol in nearly every varying faith

of the world of the visible presence of God." The followers of Zoroaster are not the only worshippers of the sun. There are "Fire Worshippers" in our day, and their number increases as the sanitary value of fire becomes known. Fire will destroy absolutely every form of disease germ, while no degree of freezing will do so. Pork may be exposed through an arctic winter, then thawed and found to propagate the trichinous disease. Cold does not destroy animalculæ, for they abound in ice-water. Heat will utterly destroy the cryptogamic spore and annihilate the mycelium, but freezing only affords them a temporary rest. All other disinfectants are feeble and ineffectual when compared with the all-purifying fire. Indeed many devastating conflagrations which in cities have been deplored as calamities have really been blessings in disguise as disinfectants and promoters of health. The great fire of London, as is well known, terminated the plague and purified that pestilential city. The ancient rabbis tell us that in times of pestilence fires were kept burning in the valley of Tophet to consume the dead and to disinfect the air.

Scientific apparatus has now been devised capable of reducing a human body to ashes safely, quickly, and not unpleasantly. There is offered to the people a custom which will forever annihilate the dangers set forth in this essay, the contamination of earth, air, and water, the liability to burial alive, the sacrilegious work of grave robbers, and much of the unnecessary expense of funerals.—*Boston Med. and Surg. Jour.*, Aug. 6th.

Treatment of the Opium Habit by Codeia. — W. H. Lindenberger, M.D., Bartlett Springs, Cal., writes: I desire to call your attention to a remedy for the opium habit. I first commenced the use of this remedy in 1883, and since that time twenty-four cases have been permanently cured under my treatment by the use of this drug. It is codeia, a drug with which all physicians are familiar; but I have known but two members of the profession who were acquainted with the proper method of its use for this trouble. In order to use the remedy properly it is necessary to be thoroughly familiar with the past life of the patient, the length of time opium has been used, and the amount used. To cure the patient of the habit, I commence, as a rule, with two grains of codeia three times a day, and increase the dose until the same effect is produced upon the system that is produced by the opium.

After the use of opium has been supplanted by the use of codeia, the system has become accustomed to a drug the use of which can be dispensed with in a very short time. Codeia, when used in this manner, does not block up any of the secretions, and has no other effect upon the stomach than to give the patient a slight increase of appetite. It has a slight tendency to constipate the bowels; and with some it produces an after-depression, but not with those who have used opium to any great extent.

Previous to the use of this remedy it was my practice to use coca in certain cases. I found, however, that it constipated the bowels and took away the appetite; and that, after continued use, it was almost as difficult to get rid of the coca habit as it had been to become relieved from the morphia.

With the use of the remedy some patients must have a tonic treatment; and if constipation exists, I have found the aloin pill, No. 1, to be the best remedy.—*Phila. Med. News*, Aug. 22d.

Poisoning by Petroleum.—In the *Gazette des hôpitaux* for June 16th, Dr. Duguet, of the Lariboisière, relates the case of a woman, aged 48, who was brought into that hospital, May 8th, having just swallowed about a pint of the ordinary petroleum of commerce with suicidal intentions. She at once felt a strong sensation of oppression along the œsophagus, and especially at the stomach, together with a sense of burning, and was in a very agitated condition. She exhaled a powerful odor of petroleum, and on vomiting being excited by ipecacuanha, with large quantities of milk, a good deal of petroleum floated on the ejections as it did in those produced from the bowels by a glyster. All the urine of the patient was carefully preserved, and that passed just before the emetic was given contained a floating layer of petroleum, two or three centimetres in thickness. On the next day after her admission the floating petroleum in the urine amounted to twenty-one cubic centimetres, but by the next day had diminished to five centimetres, and then gradually disappeared. Some albumen, which at first was present, disappeared with the petroleum. During the first four days the petroleum enabled the urine to be pre-

served without undergoing decomposition for ten days. No other feature of interest is recorded.—*London Med. Times*, Aug. 8th.

Poisoning from the Bite of a Rat.—M. Millot-Carpentier reported to the Paris Academy of Medicine the case of a young boatman on the Saint-Quentin Canal, who was bitten on the hand and lip by a rat. The wounds healed promptly, but fifteen days later symptoms of lymphangitis appeared, but soon went away again without suppuration, and then purpuric spots appeared upon the integument. The latter affection was accompanied by acute anæmia, prostration, muscular atony, and irregular febrile attacks. At the same time there were singular nervous troubles, intense dysphagia, congestion of the face, laryngeal whistling, temporary inability to speak, swallow, or breathe, and a frothing at the mouth. These attacks were attended with an increase of fever, and left the patient in a condition of extreme prostration. Sometimes the attacks were preceded by an aura starting from the cicatrix in the hand and passing up to the throat. A cure followed the employment internally of permanganate of potassium and sulphate of quinine with tonics and a nourishing diet. The author of the communication considered the case to be one of poisoning by an animal virus.—(*L' Union méd.*) *N. Y. Med. Record*, Aug. 15th.

Permanganate of Potassium and Alcohol for Snake-Bite.—B. Hall Smith, M.D., reports a case of rattlesnake-bite successfully treated with potassium permanganate and whiskey. The patient, an adult farmer, was found suffering with the combined effects of snake-venom and tobacco, an infusion of which had been administered by his friends. The punctures made by the fangs of the snake were laid open and cauterized by pure carbolic acid. As the stomach could not retain medicine, whiskey was given hypodermically into the leg or arm. The patient was greatly prostrated; there was excessive cardiac weakness, dilatation of the pupil, and he had every appearance of impending dissolution. The permanganate was given hypodermically (gr. 2½ in water f 3 ss) every twenty minutes, alternating with whiskey, and occasional doses of dilute spirits of ammonia administered in the same way. At the end of five hours' treatment the patient was thought to be dying, but several injections of whiskey and one of ether revived him, and at the end of two hours more he was considered out of danger. The treatment was successful in saving life, but it is difficult to decide just how much of the credit belongs to the permanganate and how much to the whiskey.—*Atlanta Med. and Surg. Jour.*, Aug.

Tyro-Toxicon—Cheese Poison.—At the meeting of the Michigan State Board of Health, Dr. Vaughan presented a report of his investigations on poisonous cheese. It is well known that cases of severe illness follow the eating of some cheese. A few years ago the reputation of a large cheese factory in Northern Ohio was destroyed by the great number of cases of alarming illness arising from eating its cheese. Dairymen know this cheese as "sick" cheese. . . . Dr. Vaughan has succeeded in isolating the poison, to which he has given the name tyro-toxicon (from two Greek words which mean cheese and poison). It is a product of slight putrefaction in the cheese which probably occurs in the vat, as the curd has been known to poison a person. By this slight putrefaction, or excessive fermentation as it may be called, a large amount of butyric acid is formed, and this in the presence of the casein of the cheese is capable of developing a poison. Different samples of poisonous cheese contain different amounts of the poison. The same weight of cheese from one cake furnished three times as much poison as that from another cake. The poison was obtained in long needle-shaped crystals, which are freely soluble in water, chloroform, alcohol, and ether. The smallest visible fragment of a crystal placed upon the end of the tongue causes a sharp stinging pain at the point of application, and in a few minutes dryness and constriction of the throat. A slightly larger amount produced nausea, vomiting, and diarrhœa. The poison is volatile at the temperature of boiling water, and for this reason even poisonous cheese may be eaten with impunity after being cooked. The substance has also a marked, pungent odor, and through the nose one can obtain sufficient of the volatile poison to produce dryness of the throat. This is true, however, only of the isolated poison. In the cheese the taste and odor of the poison are both modified to such an extent that they would

not be recognized, as has already been stated.—*Weekly Med. Review.*

Suffocation from Smoke or Gases.—Remove the patient at once into the open air, away from the smoke, where the air circulates freely, loosen the clothes about the neck, then proceed to restore breathing as in rules for drowning. *Keep back the crowd.* Hold the tongue forward. Work busily. Five seconds and you may be too late.

Those exposed to smoke should remember that it is less dense along the floor, and that one might escape on his hands and knees when it would not be possible to do so on one's feet. Also that a wet cloth placed over the mouth and nose will aid one greatly in pushing through the dense smoke. The great desideratum in these trying times is *presence of mind*, and the cultivation of this is the duty of every one.—*Drug. Cir.*, Aug.

PARTURIENT.

Episiotomy.—The following is the recapitulation of an article by Reynold W. Wilcox, M.A., M.D. :

The patient being in the ordinary side position, the operator, controlling the advance of the child's head with his left hand, takes the blunt-pointed, straight bistoury in his right hand. He inserts it at the commencement of a labor-pain, between the presenting head and the thinned edge of the vulvar outlet, flatwise, and where the outlet bulges most, generally at the distance above indicated from the commissure. The bistoury is held in this position during the increase and until the acme of the pain, the left hand being likewise kept in place. Immediately after the acme has been reached the edge of the bistoury is turned at a right angle to the edge of the vulva, the head being prevented from being forced out by a sudden exacerbation of the pain ; the incision is made outward, from one half to one inch, through the resisting structures. The labor now is conducted as usual, the head, as a rule, passing out at the next pain. In most cases no after-treatment is required, as the wounds almost invariably close by first intention if carefully cleansed. If the operator believes the suture to be necessary, it is done in the following manner : The first suture should enter at the junction of the skin and the mucous membrane, at the upper angle of the wound, coming out at the corresponding lower angle, and be tied. The second suture is to cover in the two small surfaces left, the one in the skin and the other in the vagina. This suture passes through the skin into the vagina, over the vaginal wound, out through the skin, and is tied over the skin wound. Iodoform dressing is then applied. The sutures are removed about the sixth day, and one will find, with difficulty, a fine cicatrix, if he examines the parts, at the end of the third week.—*N. Y. Med. Jour.*, Aug. 15th.

Conduct of the Third Stage of Labor. — Prochownick communicates to the *Centralblatt für Gynäkologie* a paper upon the management of the after-birth period. Referring to the recent criticisms of Crédé's method, he states that in none of these was included the objection, which he regards as the most important. This is the pain that the method causes, and the unwillingness of some patients to submit to it ; while, it may be urged, the majority of women would not complain, yet many nervous, sensitive women would. Our own opinion, on the other hand, is, that this suffering, usually, is not great—certainly not as great as that which was endured for hours in the previous stages of labor,—and is so brief that few object.

Prochownick gives his own method as follows : Immediately after the birth of the child the flat hand is laid upon the woman's abdomen, and, after the lapse of a few minutes, slight friction is made upon the fundus for the exciting of energetic after-pains. After the third uterine contraction has taken place, he asks the patient to flex her lower limbs, placing the soles of her feet against the foot-board, and make an expulsive effort, which in primiparæ raises the accoucheur's hand, which frequently in the parous sinks down between the recti muscles, that have been separated by pregnancy. If the placenta is not expelled, this must be repeated once or oftener, even to the seventh contraction. He states that in only one case did he have to wait longer than the seventh contraction. He is favorable to the use of ergot at the close of, or just after, the second stage of labor.

We believe the hand which is applied to the abdomen should not be flat, but concave—the manual concavity fitting to the uterine convexity,—for then the uterus is

defined, limited, a larger surface embraced, and any relaxation of the organ prevented, or at once recognized and remedied. Besides, a flat pressure, acting only upon the anterior wall, may, if this be greatly relaxed, so depress it as to prepare the way for uterine inversion. Certainly the part of Prochownick's plan which makes the woman a voluntary participant in the expulsion of the placenta, is good.—*Phila. Med. News*, Aug. 29th.

Antiseptic Midwifery.—At a meeting of the Pathological Society at Reading, held at the Royal Berkshire Hospital on June 24th, an interesting discussion took place on the subject of antiseptic midwifery. Dr. Hurry, of Reading, reported a case of puerperal scepticæmia supposed to have had its origin in the use of a syringe which had not been cleansed antiseptically. Since the above date the prominence given by Dr. Gervis, of St. Thomas' Hospital, to "antiseptics after labor" (and we would add during labor), cannot fail to make it become an important advance in obstetric practice. A reduction of the death-rate from 22.3 per 1,000 to an average of 20.3 per 1,000 is in itself a sufficient encouragemenf to further effort to reduce still more the death-rate in midwifery practice. Many of the cases of death from puerperal septicæmia could be abolished, for we believe them to be essentially within the range of preventive medicine. The peril of childbed would be bereft of much of its anxiety and danger if every thing about the parturient woman could be dealt with antiseptically. The unguent used for the finger in examination should be made antiseptic ; sponges, towels, syringes, etc., should be cleansed by antiseptic fluids before being used. Carbolic acid, or if this is disagreeable to the patient, as it is in some instances, the more agreeable thymol solution, iodoform, or Condy's fluid should be used. The one drawback to Condy's fluid is that it stains the linen, while thymol solution and sanitas do not. The latter can be freely sprinkled about the upper bedclothes and on the carpet, and added to all the water used for ablution. Nor should the practitioner's hands be overlooked. Messrs. McDougall Bros. have prepared a convenient little case of carbolic soap which can be carried in the waiscoat pocket. The regular use of this by the obstetric practitioner before making his examination would abolish the risk of septic infection from this source. No detail can be too minute, and he who neglects these ordinary precautions cannot fail to reproach himself if puerperal septicæmia arises in his practice. Should suspicious symptoms present themselves, free irrigation of the vagina and uterus by antiseptic solution should be adopted, and repeated so as to remove all possible septic secretion and discharge. It may be necessary to use the more effective solution of mercuric chloride in the proportion of 1 to 2,000, which is the most efficient antiseptic, the parts being irrigated afterwards with a solution of boracic acid. Such practice abolishes any risk from the mercuric chloride, and is a source of much comfort to the patient. A solution of from five to ten grains of boracic acid to the ounce is one of the most soothing applications to a contused and abraded mucous membrane. The fluids for irrigation should, as a rule, be of the same temperature as the normal heat of the body.—*London Lancet*, August 8th.

Inhalations of Oxygen in Puerperal Eclampsia.—At a recent meeting of the medical section of the Kharkov Society of Experimental Sciences, Professor V. G. Lashkevitch, in the course of a communication on the therapeutic value of oxygen in neuro-pathology, pointed out that oxygen possesses a considerable power of lowering an increased reflex action, and also made the suggestion that oxygen inhalations may prove of service in cases of puerperal eclampsia. Acting on the suggestion of Professor Lashkevitch, Dr. V. G. Favr, of Kharkov (*Vratch*, No. 13, 1885, p. 197), resorted to oxygen in two cases, and obtained brilliant results. The first of the cases was that of a seamstress, primipara, aged 19, who was brought to the hospital in an unconscious state, with cyanosis, stertorous breathing, and frequent eclamptic seizures, each of the latter being preceded by a uterine contraction. Warm baths, wet packings, and enemata with chloral-hydrate, brought no relief ; chloroform inhalations only slightly controlled the intensity of the convulsive paroxysms. In view of the failure of all these means, oxygen was tried. In five minutes from the beginning of the inhalations, the patient asked for water, and then fell into a quiet sleep of two hours' duration, the pulse descending from 120 to 90 per minute ; uterine contractions ceased to be a starting-

point for convulsive fits. The latter reappeared each time when the inhalations had been stopped, and again gave place to sleep and quiet on resuming the administration of oxygen. The delivery was accomplished with the help of Barnes' dilators, and of puncture of the membranes. The patient left the hospital on the 19th day after the labor, her general health and the state of the kidneys being greatly improved under an appropriate treatment. A second patient, primipara, aged 18, was attacked with eclampsia about one and a half hours after the labor. Two severe paroxysms (each of twelve minutes' duration, separated by a free interval of 20 minutes, during which the patient remained unconscious) had occurred before oxygen inhalations could be resorted to. Consciousness returned immediately. Four more paroxysms occurred, but they were considerably milder, and separated by the intervals of absolute comfort; indeed, the patient took her tea and dinner between the eclamptic fits. She made a rapid recovery. Encouraged by his success, Dr. Favr enthusiastically invites all professional brethren to give a trial to so simple a weapon against so formidable a foe, and even goes so far as to ardently hope that in a near future oxygen-gasometers will be found in all lying-in hospitals, side by side with forceps, cranioclast, cephalotribe, and other necessary instruments.—*London Med. Record.*

Female Obstetricians. — A correspondent writes that one of the recent graduates of the Women's Medical College of the New York Infirmary, while on a visit in a Western State, was called to see a case of retained placenta. When she arrived she found the attending physician, a regular practitioner and a man of some age, sitting by the bed fanning the patient. The young woman's opinion being asked, she said she would try Crédé's method of expressing the placenta, and failing in this, she would introduce her hand and remove it. The physician replied that the patient had lost too much blood, and was, in his opinion, too much exhausted to bear the operation; but gave his consent, finally, to the trial, and suggested that the visitor should do it, as her hand was smaller. This the young graduate did, and, finding the placenta attached, removed it, and secured uterine contractions. The patient did well. Another young graduate, of one week's standing, was called unexpectedly to a case attended by a homœopathic physician. The patient was unconscious and pulseless. Examination showed that the head was engaged, but the cervix uteri was separated from the body through half its extent. The young woman at once divided the cervical ring with scissors, applied the forceps, and delivered the child. The patient made a good recovery. These cases speak well for the coolness and quick wit of these young graduates, and also for the excellence of the instruction imparted to the students of the Women's Medical College of this city.—*N. Y. Med. Record*, Aug. 1st.

Cramp of the Uterus During Labor. — The *Deutsche med. Wochensch.*, quotes a method adopted by Dr. Svanberg for relieving cramp of the uterus during parturition. He employs a compress, soaked in a mixture of chloroform and olive-oil, of each equal parts, or two parts of chloroform to one of oil, applied closely to the abdomen, between the umbilicus and the symphysis pubis. He has found the result to be immediate relief of the spasm, even when the previous inhalation of chloroform had failed. — *London Med. Record.*

Puerperal Eclampsia—Hot Baths. —Breus (*Arch. f. Gynäk.*) reports that he has continued his experiments in the use of hot baths as a remedy for puerperal convulsions, and has now treated seventeen patients by that method with only one death. If there is albuminuria, that, too, is favorably affected by the baths. He first puts the patient into a bath of about 100° F., and gradually carries the temperature up to 104° or 106°. He has not found that either abortion or hemorrhage is favored by the treatment.—*N. Y. Med. Record*, Aug. 15th.

Mammary Abscess—To Abort.— Quinine, in doses of ten grains every twelve hours, will frequently abort threatened mammary abscess. It is not, however, advisable in those cases immediately following labor.—*Denver Med. Times*, Aug.

Notes from Prof. Parvin's Clinic. —*When a child is very feeble, etc.*, at birth, Prof. Parvin adds whiskey to the water in which it is bathed.

To wash out the vagina during preg-

nancy, Prof. Parvin recommends the use of a solution of borate of soda, 3 j to Oj.

To slight *erosions on the nipples*, Prof. Parvin applies tinct. benzoin.—*Col. and Clin. Record*, Aug.

GYNECIC.

Cheron's Treatment of Chronic Pelvi-peritonitis. — The treatment of chronic inflammation of the pelvic peritoneum is in many cases tedious, and often very unsatisfactory. The pain, the tenderness, and the inflammatory deposits—the last in some cases simulating new growths, and not unseldom mistaken for them—are very slow in disappearing in many cases under methods of treatment hitherto employed. In consequence of these facts, we look with great interest upon a plan of treatment which Chéron has employed with remarkable success, and which he publishes in the June number of the *Revue médico-chirurgicale des maladies des femmes.* He uses hypodermatic injections of the crystallized phosphate of soda. The solution, which should be freshly prepared and carefully filtered, is made of one part each of crystallized phosphate and of sulphate of soda to twenty parts of distilled water. The quantity used for an injection is one drachm ; it should be injected into the subcutaneous connective tissue, not into the subdermic. The injection should be made slowly, and massage of the part made for a minute or two. The injections are to be repeated every six or eight days.—*Phila. Med. News*, Aug. 15th.

Pyosalpinx. — Lawson Tait has the honor of first pointing out the symptoms and treatment of this disease. According to his views it is a chronic inflammation of the Fallopian tubes, caused most usually by an attack of gonorrhœa. In delivering a clinical lecture in Bellevue Hospital last October he remarked :

" Until I pointed it out some four or five years ago, the fact was not known, or, at least, had been completely lost sight of, that gonorrhœal inflammation spread along the Fallopian tubes and gave rise to immense mischief."

The tubes become inflamed and occluded, and the risk to life, he thinks, in pyosalpinx, from rupture of the tube and discharge of pus into the perinæum, is very great—so great, that the accident occurs in about 50 per cent. of the cases. The method of operating for the cure of pyo- or hydrosalpinx is by his usual abdominal incision. He cautions against operating from below, as some advise ; indeed, he thinks it is dangerous.—*North Carolina Med. Jour.*

Galvano-Cautery — Uses of.—Prof. Waugh, Med.-Chir. Col., Phila., gives the following among other cases :

A lady consulted me for profuse leucorrhœa. Examination showed a small tumor springing from the inner anterior surface of the cervix. The slightest touch induced free hemorrhage, so that the view was obscured, and any operative procedure rendered difficult and uncertain. Having carefully introduced a Nelson's speculum, and waited for all hemorrhage to subside, I applied the cautery knife, at a dull-red heat, to the root of the tumor, and removed it with little difficulty. No hemorrhage occurred ; the vessels being effectually sealed up by the heat.—*Med. and Surg. Rep.*, Aug. 15th.

Electricity in Uterine Diseases.—The following is the substance of an article by Dr. S. F. Starley, Tyler, Texas :

In a large proportion of the cases we are called upon to treat, we find, not only that the patient is suffering from some inflammatory engorgement of the uterus, but frequently also from hyperplasia and sub-involution of the organ as well. Now, in this state of things, I know of no equally effective means of getting a start toward breaking up the morbid condition, to that of the mild employment of the electrolytic action of the galvanic current, applied once every second or third day for from ten to fifteen minutes. When we remember that this effect of the constant current is to produce a chemical disturbance of the animal tissues through which it passes, the oxygen and acids going towards the positive, and the hydrogen and alkaline constituents toward the negative pole, we see at once that we have thus produced the most favorable condition for the absorption of the hyperplastic material, not only by the breaking up of its elemental combinations, but by the stimulating effect of electricity over the absorbent vessels.

In most cases of uterine diseases, we find the patient suffering from painful neuralgia, and other disturbances of the nervous system ; and here we have in electricity, perhaps, the most potent and durable remedy

that we can possibly bring to the relief of our patients. Then there are the well-known *nerve tire*, and physical as well as mental exhaustion, that so constantly attend womb troubles of almost every kind. Such cases require tonics, and while our Materia Medica supplies us with so great a number of valuable remedies of this class, there are none, perhaps, so prompt in their effects, so general in their applicability, and so encouragingly satisfying to our patients, as faradization properly and perseveringly applied. It at once imparts to the patient a sense of renewed strength of both body and mind.—*Daniel's Texas Med. Jour.*, Aug.

Fibro-Myomas — Electricity.— The more conservative method of treating fibromyomas by electricity is beginning to compare favorably with its bolder rival, the bloody operation. The former method, of applying a *weak*, *interrupted* current, and the active pole only within the vagina, is now superseded by the application of an *intense*, *constant* current, with the active pole within the uterus. The advocates of this new method of procedure claim for it a great superiority over the former.

Dr. Apostolie, of Paris, records more than 100 cases in which recovery was complete. The tumors did not disappear altogether, but they atrophied and shrank away.—*N. C. Med. Jour.*

Hystero-Epilepsy Cured by Cauterization of the Clitoris.—Dr. Hinze reports a case of supposed hystero-epilepsy, which was cured (?) by three applications of nitrate of silver to the clitoris. From July 14th to August 12th, the patient had fifteen convulsive attacks. On September 22d, the three cauterizations having been made within a period of a little less than six weeks, she was discharged apparently well. (*St. Petersburgh Med. Wochensch.*)

It would seem advisable to try the effect of this remedy in cases dependent upon local irritation, before resorting to the grave operation of oöphorectomy.—*Detroit Lancet*, Aug.

Pelvic Hæmatocele.—Dr. C. A. L. Reed, of Hamilton, read a paper on this subject to the Med. Soc., State of Ohio. He thought there was much of fiction in the common remark that there is no danger from the puncture of a trocar. He favored the evacuation of coagula, and thought that the demands of science and humanity called for some means of controlling the initial hemorrhage. He believed that the operation by incision along Poupart's ligament, and the elevation of the peritoneum, was a valuable procedure in cases in which the accumulation lay beneath the broad ligament. In view of the extreme probability of septic troubles, we were justified in some simple expedient to control the initial hemorrhage. This could be done by simple ligation of the vessels beneath the broad ligament. It was not the serious operation it had been pictured.—*New York Med. Record.*

Perforation of the Intestine Caused by a Bimanual Examination. — Dr. Schwarz relates the case of a woman, forty-six years of age, who had suffered for a long time from a fibrous tumor of the womb. Shortly after a bimanual examination the patient was seized with peritonitis, and died. The writer supposed that the inflammation was caused by a rupture of the uterus and the passage into the abdominal cavity of some mercuric chloride contained in a vaginal douche. At the autopsy, however, he found that there had been adhesions of a loop of intestine to the uterus, and these adhesions had been broken and the gut ruptured by the manipulations, notwithstanding the fact that the examination had been conducted with great gentleness owing to the tenderness of the womb. —(*Jour. de méd de Paris*) *N. Y. Med. Record*, Aug. 29th.

Scirrhous Carcinoma of the Breast. —Dr. W. H. Iszard, of Camden, N. J., assisted by Drs. Ireland and W. A. Davis, recently removed a scirrhous carcinoma weighing between four and five ounces from the right breast of a woman æt. 33 years. She first noticed the tumor as a small, hard lump about seven months ago, but did not call Dr. Iszard's attention to it for about six months, when he advised its early removal. About two weeks later Dr. Iszard removed it, by making two elliptical incisions on a line with the pectoral muscles, severing but three small vessels. These were immediately closed by the use of serrafines. The tumor was firmly adherent to the pectoralis minor. It and all the involved glands were removed, yet saving the nipple, which was not yet retracted, and a portion of the breast, leaving very little or no deformity. The parts were then well cleansed with car-

bolized water, stitched with iron-dyed silk ligatures, and a three-quarter-inch space was left for drainage at the lowest part of the incision. Three compresses were then placed, one below, one above, and one directly over the dressing, and a firm bandage applied over all. The patient did not suffer any pain after the operation. The wound healed rapidly and she is now attending to her household duties.—*Med. Bulletin*, Aug.

Mennorrhagia—Hamamelis.—Prof. Parvin has obtained excellent results in uncomplicated cases of menorrhagia from the administration of ℥xx of the fluid extract of hamamelis every four hours. He frequently directs the patient to take from eight to ten grains of quinine daily also.—*Med. Bulletin*, Aug.

Oleate of Manganese in Amenorrhœa.—Dr. Franklin H. Martin read a paper at the Chicago Med. Soc. on its method of application. He recommends that one drachm of a twenty-per-cent. solution of the oleate of manganese in oleic acid be applied to the abdomen of the patient, and its absorption promoted by friction with the hand. In amenorrhœa it should be applied, if possible, every night for a week preceding the expected menstrual period, or at the time menstruation is due, and until it makes its appearance. In menorrhagia or metrorrhagia it should be applied in smaller quantities every night, until the desired effect is produced. Of about a dozen cases in which the oleate has been prescribed by him, but four had reported. The success in these four was all that could be wished. Three of the four were cases of *atonic amenorrhœa;* the fourth, irregularity due to approaching menopause.—*Jour. Amer. Med. Ass'n*, Aug. 29th.

Treatment of Persistent Metrorrhagia.—

℞ Ergotine (Bonjean's) . . . gr. xlv.
Rutæ pulv.,
Savinæ pulv. . . . . āā gr. xxij.
M. Ft. pil. No. xxx.
Sig.—Take two pills daily, and increase to four.

—(*Revue de thérap.*) *Phila. Med. News*, Aug. 15th.

Vaginitis — Granular.—In cases of *leucorrhœa*, associated with granular vaginitis, Prof. Parvin uses for the latter condition nitrate of silver, combined with a tampon saturated with ʒj each of alum and bismuth; the tampon to remain twenty-four hours. For simple cases of *leucorrhœa*, he uses an injection of chlorate of potassium, ʒj to Oj.—*Col. and Clin. Record*, Aug.

Treatment of Lumbar Neuralgias Coming from Affections of the Uterus.—Dr. Naudin recommends the following:

℞ Chloroformi, ... 10 grammes.
Ætheris, ... 25 "
Tinct. opii, ... 6 "
Glycerini, ... 90 " M.
Sig.—Rub on the painful part morning and night.

—(*Paris Letter.*) *Phila. Med. Times*, Aug. 22d.

Uterine Fibroid—Internal Medication.—Prof. Parvin placed a woman with *uterine fibroid*, upon the following:

℞ Ergotin, ... gr. j.
Ferri sulph. exsic. . . . . gr. j.
M. Ft. pil. No. 1.
Sig.—Ter die. Persistently used.

For the accompanying hemorrhages a tampon saturated with tinct. iodine or Monsell's solution.—*Col. and Clin. Record*, Aug.

PEDIATRIC.

Cure of Infantile Paralysis by Electricity.—In a remarkable memoir on infantile paralysis, Dr. Dive (*Revue mensuelle des maladies de l' enfance*, June, 1885) assigns to the action of cold an important part in the etiology of this morbid process. Out of 140 cases, which form the basis of this monograph, the author has, in 37 instances, been able to find a direct causative influence in exposure to cold. In 19 cases the disease occurred as a complication of typhoid fever; in nine cases it apparently was due to some inherited nervous defect; in 3 cases the parents were intemperate; and in the 13 other cases the attacks were recurrent, without any distinctly determinable cause.

The author believes that the best means of treatment consists in the application of electricity, combining the galvanic currents with the faradic, although the galvanic currents alone may be successful in the production of a cure, provided treatment commence in the earliest stages of the disease. It is necessary to make use of a battery with constant current and feeble chemical action, and to pass the current down the

spinal cord, so as to act on the seat of the lesion, which resides in the anterior horns of the spinal cord. This mode of treatment must be persisted in for several weeks, and then the paralyzed and atrophied muscles subjected to the action of the faradic current, while, during the same sitting, the positive pole of a constant current is placed on the vertebral column, at the seat of the lesion, and the negative pole on the path of the nerve, passing to the atrophied muscles. Finally, during the last three minutes the continuous current must be passed through the vertebral column. The applications should be made on alternate days.—*Therap. Gaz.*, Aug.

Retention of Urine in a Child of Six Months.—M. Arnozan, in the *Jour. de méd. de Bordeaux*, reports the case of a child, six months of age, who suffered from retention of urine. The child had previously been healthy, and had had no difficulty in urinating, but when seen by M. Arnozan had not urinated for thirty-six hours. It cried and vomited. The bladder was found firm and full in the hypogastrium. The testicles were retracted. The penis and perineum presented no abnormal condition. Catheterization was performed without difficulty with a small elastic Charrière catheter, and urine, very dark but clear, to the amount of nearly four and a half fluid ounces was drawn from the bladder. The child at once was relieved and went to sleep. Two or three days subsequently the urine became slightly purulent, and catheterization was continued for ten days, at the end of which time urination occurred spontaneously. Catheterization was required subsequently but once. The child since the attack has been in good health, but when suffering even from slight indisposition, slight transient difficulty in micturition is manifested.—(*L' Abeille méd.*) *Phila. Med. Times*, Aug. 1st.

External Use of Chloral-Hydrate in Night-Sweats.—In the *Vratch*, Dr. Nikolaï emphatically recommends the treatment of night-sweats (in phthisical as well as in all weak patients) by daily (at bedtime) sponging the whole body with a solution of two drachms of chloral-hydrate in two glassfuls of equal parts of water and *vodka* (aquavitæ), at the temperature of 15° to 18° Reaum. (65.75° to 72.5° F.). In exceptionally obstinate cases, it is advisable, in addition to the sponging, to put on the patient a clean shirt soaked in the chloral solution, and then carefully dried. The procedure is well borne by the patients. The best results were obtained by the author in children suffering from non-phthisical night-sweats, three or four spongings being often sufficient to check profuse perspiration of several weeks' duration. The author is not aware of any contra-indications to the plan above described.—*London Med. Record.*

Cholera Infantum.—Dr. W. B. Ryan states that he has found the following prescription absolutely infallible in controlling the vomiting and diarrhœa of cholera infantum :

℞	Ext. balladonnæ fl. . . .	ʒ j.
	Tinct. opii camph.	ʒ iss.
	Sodii sulphis	℈ iiss.
	Syr. limonis . . q. s. ad.	ʒ iij.

M. SIG.—One teaspoonful every two or three hours, or more frequently if necessary. [For a child one year of age.]

—*Med. Bulletin*, Aug.

Intestinal Catarrh of Children.—Dr. J. M. Keating recommends the following as a very valuable remedy in the treatment of vomiting in the intestinal catarrh of children :

℞	Sodæ bicarb.	gr. xv.
	Creasotæ	♏ij.
	Syrupi acaciæ	f ʒ ss.
	Aquæ lavandulæ	f ʒ j.—M.

SIG.—Teaspoonful.

* * * * * * *

As the most valuable prescription for the treatment of cholera infantum, he recommends the following :

R	Morphiæ sulph.	gr. ½.
	Acid. sulph. aromat. . . .	gtt. xxxij.
	Sp. vini gallici	f ʒ ij.
	Syrup simp.	f ʒ ss.
	Aquæ anisi. . . q. s. ad.	f ʒ ij.

SIG.—Teaspoonful every hour.

—*Arch. Pediatrics*, July.

Cocaine in Infantile Coryza.—As is well known, the coryza of nursing infants may, by preventing suckling, prove a very serious affection. It can be cured, however, according to Semtchenko (*Gazette méd. de Paris*, June 6, 1885), by the introduction into the nasal cavity six times daily of two drops of a two-per-cent. solution of the hyrochlorate of cocaine. According to the author, children which previously had obstinately refused to nurse will commence to suckle a few minutes after the first application of the cocaine, and the coryza is

ordinarily cured after about four days of this treatment.—*Therap. Gaz.*, Aug.

Tape-Worm in a Young Infant.—At the June meeting of the District Medical Society for the County of Hudson, N. J., Dr. S. A. Helfer, of Hoboken, exhibited portions of a tape-worm, in all about five feet in length, removed from a nursing infant five months old.—*Arch. Pediatrics*, Aug.

Calmative for Teething Children.—M. Vigier (*Gaz. hebdom. de méd. et de chir.*) gives the following formula of a *sirop de dentition :*

Hydrochlorate of cocaine . .	1½ grains.
Tincture of saffron	10 drops.
Syrup	2½ drachms.

The painful gums are to be gently rubbed with this syrup several times a day.—*N. Y. Med. Jour.*, Aug. 22d.

Diarrhœa of Infancy.—Albuminate of tannin (made by adding the white of an egg, previously beaten with water, to solution of tannin) has been found very useful in the treatment of diarrhœa in young infants.—*Birmingham Med. Rev.*, Aug.

SURGICAL.

German Surgery.—A correspondent writes from Leipzig to one of our contributors : I have been spending much time here, and have found Leipzig very convenient for work ; it is also within easy reach of Professor Volkmann at Halle. Professor Thiersch has been very kind to me, and I have seen a good many cases of much surgical interest : excisions of the rectum, pylorus, kidney, etc., besides numerous joint and plastic operations. Volkmann is a splendid operator ; I think he excels in excising the rectum. Celerity in operation seems to be aimed at both here and at Halle ; this is obtained by ignoring hemorrhage to a much greater extent than we do in England. Enormous quantities of corrosive sublimate are used for irrigation at Halle. The dressings are, first, a small piece of gauze highly charged with iodoform, and then a large bag of what they term "turf-moss." I think it corresponds to our heather. It is prepared by washing, soaking in carbolic acid, and, lastly, drying. On my way here, I stayed a few days in Hanover, and saw several operations performed by Dr. Lindemann. He showed me a very ingenious apparatus for supporting the head in cervical caries. His cases of amputation and necrosis were all in baths of potash or soda. I saw an extraordinary case of an old woman, who had a large portion of the dura mater exposed and pulsating without any symptoms. The primary disease was abscess and necrosis of the walls of the frontal sinus. I have seen the medulla of the long bones scraped out several times. After excision of the knee, iron nails four inches long are used to fix the bones. They are removed at the end of three weeks. Professor Thiersch had a very good case of epispadias the other day. He divides the operation into three stages, and he showed me a man upon whom he had operated thirty years ago, and who now has a wife and family. I also witnessed a good case of skin-grafting. Grafts, of the size of half-a-crown, were taken off the arm of a patient by means of a microtome-razor, and placed on a huge ulcer of the leg. They did well. Before all operations, a great deal of ether is used to cleanse the skin. The plaster-of-Paris jackets are made extremely well here, very light, yet strong ; the plaster is certainly of very good quality. A curious case occurred the other day, rupture of the adhesions of an ovariotomy-wound on the eighth day after removal of all the sutures. The bowels protruded, and were exposed for some time, but after washing they were returned, and the woman recovered without a bad symptom. In operations for cancer of the tongue, the lingual artery is always tied as a preliminary to the main operation. I also saw a palate which had been shot away, and successfully filled up by skin from the cheek. It was curious to see hairs growing in the roof of the mouth.—*British Medical Jour.*, Aug. 8th.

Remarkable Surgery.—A Berlin secular journal gives an account of a singular feat of surgery performed recently by Prof. Bergmann, of that city. Two cases presented themselves simultaneously to the professor's surgical clinic, one a necrosis of the humerus and the other an amputation of the femur. The necrosis of the humerus called for an extensive removal of dead-bone tissue, which Bergmann supplanted by a large piece from the amputated femoral bone. Perfect success attended this certainly unique surgical procedure.—*Therap. Gaz.*, Aug.

Transplantation of Large Skin-Flaps on Fresh Wounds.—Esmarch (*Centralbl. f. Chirurgie*, No. 29, 1885), of Kiel, speaking before the Wiesbaden Congress, referred to his success in numerous cases of making large tegumental graftings. He showed four pictures intended to illustrate the subject.

The first picture showed the nose of a lady who for the past ten years had suffered from a rodent cancer of the nasal bridge, and was twice operated upon in Berlin with the sharp spoon and subsequent thermo-cautery. A skin-flap of a proportionate size was taken from the left arm, and, after carefully removing all fatty particles, was fastened on four different places to the affected place, which had previously been carefully denuded, including its healthy margins. In four months there was but little difference in color between the transplanted portion and surrounding healthy tissues.

The second picture showed a pigmented mole at the external angle of the eye, which greatly disfigured the face. The mole was removed, and the loss of substance covered by two slender flaps taken from the arm. All three wounds healed rapidly by first intention. The third picture showed the gratifying results of the operation after three weeks. The fourth picture showed the healing of two flaps taken from the arm and transplanted to the chin, where a severe injury had necessitated the removal of a large skin-area.

The careful removal of fatty and loose cellular matter is of prime importance for the success of this operation. The flap must be considerably larger than the exact size of the denuded surface requires, as great contraction of the grafted surface always ensues. Strict antiseptic precautions are of course *conditio sine qua non*.—*Therap. Gaz.*, Aug.

Resorcin in Malignant New Growths.—In the *Russkaia Meditzina*, No. 6, 1885, p. 121, Dr. G. J. Gatchkovsky, of Rybinsk, details four cases of cancer-like new growths, in which he, following the instance of Dr. Mannino (*Zeitschr. für Therapie*, No. 12, 1883. p. 132), applied locally resorcin, either in substance or in the shape of a 50-per-cent. vaseline ointment. In two cases of what seemed to be epithelioma of the lower lip, complete cicatrization followed after eight and five weeks' treatment; in one of them there was no return up to the date of the article (thirteen months have elapsed); but in the second case, by the end of two months the cicatricial tissue became exulcerated, and lancinating pain reappeared; the ulcer again healed under resorcin treatment of three weeks' duration. A third patient, a woman aged fifty-six, presented a malignant tumor of the anal margin, as large as a hazel-nut, and diffuse cartilaginous infiltration of the lower part of the rectum. The tumor entirely disappeared after fifteen days' powdering, twice a day, with resorcin; subsequently, daily rectal suppositories with 20 grains of resorcin were administered, but unfortunately the patient soon left the town, and thus was lost out of sight. A fourth patient, a woman, aged 45, was admitted to the hospital about a month before her death, with advanced cancerous destruction of the whole right half of the tongue, and with induration of the submaxillary lymphatic glands. Powdering (twice daily) with resorcin rapidly removed the offensive odor and hemorrhagic tendency, and also greatly improved the general state of the ulcer. Dr. Gatchkovsky found resorcin in powder of great use also in cases of acuminated condylomata and fungus umbilici.—*London Med. Record.*

Surgery of Cysts of the Pancreas.—The *Amer. Jour. of the Med. Sciences* for April contains an exhaustive paper, by Dr. Senn, of Milwaukee, on the "Surgical Treatment of Cysts of the Pancreas," an affection which, for obvious reasons, is not only extremely difficult of diagnosis, but rarely comes under the domain of the surgeon.

In his own case, that of a young man nineteen years of age, a cyst, containing three quarts of fluid, had developed in five weeks, as the result of a severe fall and blow, through which it was assumed that the pancreatic duct had been lacerated, that the pancreatic fluid infiltrated the gland, and that the cyst formed at the expense of its parenchyma and by distension of its capsule. For the first two weeks after the injury, diarrhœa and vomiting were prominent symptoms, and were followed by the appearance of a round, smooth, fluctuating, and painless tumor, which, on admission to the hospital, was found to occupy nearly the whole epigastric and the entire left hypochondriac region. The cyst was exposed by an oblique

incision, five inches in length, made through the abdominal wall over its most prominent portion; the omentum, covering and slightly adherent to the cyst, was opened by an incision three inches long; the fluid was evacuated by cutting into the sac, and the edges of the incision were united to the parietal peritoneum, which had previously been stitched to the skin. Two large drainage-tubes were inserted, antiseptic dressings were applied, and the cure was complete in eight weeks.

The case of Dr. Senn is the sixth on record in which cysts of the pancreas have been subjected to operative interference. In 1881, Rokitansky attempted extirpation of the sac, but this was rendered impossible by the firm and numerous adhesions, and death ensued from purulent peritonitis. Nine months subsequently, Bozeman successfully removed a cyst, which, with its contents, weighed twenty-one pounds and a half. In the remaining four cases, in the hands, respectively, of Kulenkampff, Gussenbauer, Thiersch, and Senn, pancreatotomy was performed, and all of the patients recovered, one having a permanent fistula. From the deep situation of the pancreas, the shortness or absence of a pedicle, and the anatomical relations of the organ, extirpation is of doubtful propriety, while antiseptic incision appears to be a safe and efficient procedure, although it may subject the patient to the annoyance of a persistent fistula.—*Phila. Med. News*, Aug. 1st.

Radical Cure of Cancer of the Rectum.—Maurice Polosson, in an article on this subject in *La Lyon méd.*, proposes to operate for the radical cure of cancer of the rectum by first performing colotomy, and then making a secondary operation for extirpating the cancer. The preliminary operation renders the extirpation of the neoplasm more easy and less subject to subsequent complications. Polosson has tested this method in one case, making the artificial anus in the iliac region. This case recovered.—*Jour. Amer. Med. Ass'n*, Aug. 22d.

Cure of Crooked Noses.—This subject is renewed, to give Dr. Roberts' original method more in detail than formerly. He says: "With a scalpel introduced through the left nostril, I perforated the cartilaginous septum at its upper and back part, and made a long incision through it in a direction downwards and forwards. This permitted me to push the whole of the external portion of the nose to the left, thereby straightening the cartilaginous septum, and overcoming to a great extent the lateral deformity. To retain the parts in this position, I introduced a steel pin, about one and one fourth inches long, into the right nostril, and passed it completely through the anterior and upper segment of the divided septum, near the columella. Having the unmovable portion of the septum thus transfixed, I was enabled, by carrying the head of the pin to the left, to move the anterior part of the nose to the left, and retain it there by imbedding the point of the pin deeply in the unmovable cartilaginous septum and mucous membrane at the back of the left naris. In other words, I incised the deformed cartilage, and pinned it in position very much as you would pin a flower in the buttonhole of a coat." The novelty of Dr. Roberts' method consists merely in pinning the parts in position until cicatrization takes place—a method, he claims, which leaves no noticeable scar, is not troublesome to the patient, and is applicable to those slight deformities whose chief annoyance is an æsthetic and cosmetic one. The pins are left in position about two weeks.—*Boston Med. and Surg. Jour.*, Aug. 13th.

Treatment of Stone in the Bladder.—Mr. Reginald Harrison, at the conclusion of an elaborate paper upon the treatment of stone in the bladder, says, in reference to the management of hemorrhage:

The treatment of immediate and secondary hemorrhage in cases of lithotomy, prostatotomy, and cystotomy, has given me much consideration, as in a large experience of these operations instances of these complications have from time to time arisen. When an artery has been divided, and is evidently spouting, it must be tied; this can generally be done with the aid of retractors without much difficulty; to plug a spouting vessel, if it is possible to avoid it, is to court the recurrence of a bleeding. More usually I have noticed, as in section of the prostate and adjacent parts, this bleeding is of a freely oozing nature, as if from spongy textures, but in this way many ounces of blood may be quickly lost. I have invariably noticed in the cases referred

to, when the bleeding has been of this oozing nature, how easy it is to control it with the point of the finger introduced and well carried into the bottom of the wound, sometimes even by the finger in the rectum. For the finger in the wound I now substitute a lithotomy tube of a size which precisely fits the wound-cut in the bladder that has been made. I have them made of different calibres, so that they may fit with tolerable accuracy. They are tied into the bladder by the usual perineal band, and drainage through them is carried on by the inner rubber tube, which can be changed at will, and by which the bladder is washed out and the urine carried into a vessel by the patient's bedside.—*Annals of Surgery.*

Cocaine in the Avulsion of Ingrowing Toe-Nail.—Dr. F. Peyre Porcher writes: A lady came to me after undergoing very great suffering all winter from the ingrowing of both toe-nails. She had been incapacitated for taking exercise; there was loss of sleep, and her health was being undermined.

As it was a condition precedent that there was to be *no pain*, chloroform was promised if required, and I proceeded as follows:

A four-per-cent. solution of hydrochlorate of cocaine was instilled, drop by drop, from the point of a hypodermatic needle, upon the slightly raw surfaces in the furrows on each side of the ingrowing nail of the big toe. A rag, wet with the same, was kept pressed against the upper surface of the toe, and three injections of this strength were made hypodermatically in the flesh at the base of the nail, just above the matrix. The tissues here being thin, and not very cellular in structure, probably ten to fifteen drops may have been received and absorbed.

After the lapse of fifteen minutes, the narrow blade of a fine-pointed pair of scissors was passed under the nail, which was divided to the matrix, when the two portions of nail were forcibly extracted with strong forceps, and any shreds of nail remaining at the roots were cleared out.

Having remarked that the operation was finished, the lady, who had not winced, expressed great surprise. After three days she was well enough, wearing a light slipper, to visit friends some miles in the country, and three days later returned to her home in one of the upper counties.

I had witnessed a similar operation performed by a gentleman in this city, which was successful.—*Med. and Surg. Rep.*, Aug. 22d.

Treatment of Scars.—Dr. Prewitt exhibited to the St. Louis Medico-Chirurgical Soc. a case illustrating the healing of scars. This patient, a number of years ago, was kicked in the face by a horse. No physician saw the wound. It was dressed with cloths; perhaps a little alcohol or something of that sort was applied to it, and it was allowed to heal. The result was that it produced not only a scar, but a depression several lines in depth at one point that disfigured the face very considerably. A photograph was shown which, by using a magnifying-glass, gave an idea of the depth and extent of the scar. The scar extended from the border of the lip up to the malar bone, and drew the lip up, and occupied the breadth of at least three quarters of an inch in each direction at its broadest part. Dr. Prewitt simply cut out the scar, cut under the depressed portion, drew the cheek a little forward and the lip downward, whereas it was drawn up before, and then put in three pins, two bringing the edges of the wound together, and the third one beneath a portion of the integument which had been detached at the depression so as to bring the deeper portions in contact, causing union. A linear cicatrix resulted. A little redness still existing at the points where the pins passed through, will, of course, disappear, and the improvement is very decided, not only in the appearance of the face, but in the outline of the mouth as well.—*St. Louis Cour.-Med.*, Aug.

Galvano-Cautery — Uses of.—Prof. Waugh, Philadelphia, reports several cases, including the following: A lady had been long afflicted with nasal polypi. She had had them removed a number of times, but they had quickly reappeared. Ordinarily, we remove a few at each sitting, with forceps or wire snare, stopping when compelled to do so by the hemorrhage which obscures the view. In this case, after using the snare, I applied the cautery to the cut surface to check the bleeding, and was enabled to complete the operation at one sitting. I noticed then, that the patch of membrane from which the growths sprang was studded with minute polypi, ready to develop at once, when the pressure of the

larger tumors was removed. This surface was cauterized by passing the knife lightly over it ; and there has been no return of the polypi.

I do not mean to imply that the galvanically-heated knife is different in its properties from any other cautery, but practically it is vastly more convenient. In operating upon hypertrophied tonsils in children, we must not heat the knife until it is touching the tonsil, and the child need not know that heat is used ; while few children would remain quiet if you approached them with a cautery iron just drawn from the furnace.

When one has become familiar with this instrument, he finds many other uses for it. Hypertrophy of the nasal mucosa, hemorrhoids with relaxed sphincter ani, warts, condylomata, pingueculæa, sluggish ulcers, and numberless other affections may be advantageously treated by it, even by physicians who have not the training of the specialists.

The apparatus I use was constructed by Otto Flemming, of this city, and leaves little to be desired in the way of durability, cheapness, and efficiency. It is so simple in management that a child could operate it, and it does not get out of order. In the one quality of portability it is excelled by the Paquelin thermo-cautery.—*Med. and Surg. Rep.*, Aug. 15th.

Experiments Upon Engrafted Bone.—Dr. Ambrogio Ferrari, after a long series of experiments upon the phenomena attending the engrafting of bone, reaches the following conclusions :

1. Pieces of bone engrafted into the shaft of a long bone become completely united and continue to live.

2. They not only continue to live, but also grow.

3. That such results follow without reference to the position in which the engrafted bone is placed.

4. The reunion of grafts occurs by a true vascularization which takes place between the engrafted bone and that into which it is introduced.

5. That a bony callus, periosteum, and medulla are formed in relation with the engrafted bone.

6. That, as in fracture, this callus possesses a temporary vitality.

7. That after a certain time the callus, periosteum, and medulla are absorbed, and the engrafted bone is nourished only by a greater vascularization.

8. That grafting occurs more completely if the inserted bone is in exact adaptation with the margins of the bone receiving it. While this observation is not verified, in a case where the opposite condition existed, a longer time was necessary for union to take place.

9. The most complete and careful antisepsis is required in order that complete union of the engrafted bone may occur.

10. The engrafting of several pieces of bone succeeds completely.

11. That in case of engrafting of several pieces of bone with partial suppuration, union of some of the pieces may take place provided suppuration does not extend to that portion of the engrafted bone in communication with the medulla.

12. Besides antiseptic precautions compression is required to maintain contact between the medulla and the pieces of bone engrafted in order to obtain a successful result.—(*Gazetta degli Ospitali*) *Phila. Med. News*, Aug. 15th.

Abscess of Both Frontal Sinuses.—Dr. Charles S. Bull, of New York, read a paper to the Amer. Ophth. Soc. on this case : The patient had been hit on the forehead fourteen years previously with a piece of wood. This produced a fracture of both nasal bones and deviation of the septum. In seven weeks the wound had closed. Ten years after the accident a swelling was noted at the upper inner angle of the right orbit which could be made to disappear by pressure. There was complete ptosis. An incision was made into the swelling just beneath the orbital margin, and a large quantity of pus escaped (two or three ounces). The cavity was washed with a five-per-cent solution of carbolic acid. No connection with the superior nasal meatus could be detected, but the bony septum between the two frontal sinuses was absorbed, and both sinuses were converted into large cavities. The entire ethmoid bone was an immense cavity, the bony structure being absorbed. A number of osteophytes were removed. A drainage-tube was introduced. The patient was discharged six weeks after the operation, and recovered completely. The ptosis disappeared, and the eye was restored to the normal plane.—*N. Y. Med. Record*, Aug. 8th.

Trephining the Frontal Sinuses.—Mr. Ogston, of Aberdeen, states that he has practised the operation in several cases of obstinate catarrhal disease, in which other treatment was unavailable. The symptoms indicating this measure were constant pain at the root of the nose and above the orbits, increased on deep pressure, with periodical discharges of thick, yellow pus. The operation consists in making a vertical incision two centimetres long in a median line, between the eyebrows, after which the periosteum is carefully lifted from the bone and the sinuses are opened with a small trephine. The diseased mucous membrane is removed with a sharp spoon, and a strong solution of chloride of zinc is applied to the interior of the cavity. Drainage is established through the nose.

This radical procedure (by no means new, since it was practised by von Langenbeck) has received a decided impetus at Mr. Ogston's hands; but, in spite of the fact that he reports a cure in every case, and with no recurrence of the trouble, conservative surgeons will be apt to hesitate before resorting to a measure that seems to be of such an heroic nature.—*Boston Med. and Surg. Jour.*

Intestinal Suture after Enterectomy.—A Paris correspondent writes that MM. Duplay and Assaki have tested a new method of intestinal suture on animals. One end of the divided intestine is invaginated into the other, and the mucous membrane of the upper end is immediately in contact with that of the inferior. A double thread is passed through the canal thus formed, and only two or three superficial sutures are then inserted. About fifteen days after the operation the passage is perfectly free. Microscopic examination demonstrated that there was uninterrupted continuity of the serous membrane, and not the slightest indication of an inner valvular projection.—*British Med. Jour.*

Tumors in Animals.—Mr. J. R. Bland Sutton, F.R.C.S., London, in an elaborate study of tumors in animals, reaches the following interesting conclusions:

1. No tumors are peculiar to man; certain forms occur with greater frequency in him than in other animals, notably the cancers. This may depend on paucity of observations, but the conclusion is warranted by our present knowledge.

2. Sarcomata, fibromata, osteomata, and enchondromata are the most widely diffused of all growths; they occur in fish and all intermediate forms up to man. We have reliable evidence of the occurrence of osteomata in extinct forms; these growths constitute an ancient inheritance.

3. Fatty tumors are almost entirely confined to animals long domesticated,—the ox, horse, sheep, etc.

4. Odontomata are of frequent occurrence in mammals.—*Phila. Med. News*, Aug. 8th.

Aseptic Hands.—Professor Forster, of Amsterdam, recently determined to ascertain how the hands could be made absolutely free of germs. His experiments showed that washing in a 2½-per-cent. carbolic solution was useless, as was also the plan recommended by Billroth—viz., with sublimate and 10-per-cent. solution of phenol in glycerine. Washing them, however, in aqueous solution of sublimate, 1 or 2 per 1,000, after a previous thorough washing with soap and water, sterilized them so completely that the most delicate nutrient solutions gave no subsequent trace of growth of fungi. The practical bearings of such a demonstration are sufficiently obvious without enumeration in detail.—*London Med. Press*, Aug. 19th.

Dislocation of the Metacarpal Bones.—Mr. Morgan's interesting communication has reminded me of a case which was under my care some years ago. A man, aged 77, was kicked by a horse on the back of the left hand, with such force as to dislocate the second, third, and fourth metacarpal bones backwards. Reduction was effected, without the aid of chloroform, about two hours after the accident had happened. A good deal of force had to be exerted. There was no tendency after reduction to a return of the dislocation.

As Mr. Morgan says, authorities are mostly silent with regard to the dislocation of the metacarpus. In the Museum of the Royal College of Surgeons there is—or was—a specimen of partial dislocation of the fourth metacarpal bone backwards. It seems to have lost its connection with the os unciforme only, being still articulated with the os magnum.—(Thos. F. Raven, Broadstairs) *British Med. Jour.*, Aug. 22d.

Sprains—Elastic Bandage.—This method of treating sprains has recently

been revived by Mark See. It is the only method which fulfils the two indications: 1. To cause as rapid absorption as possible of the blood extravasated around the joint (a lesion which controls all the other symptoms, such as pain, swelling, difficulty of movement, etc.) 2. To favor cicatrization of the torn ligaments and ruptured parts by complete immobilization. The bandage should be applied to the skin itself, care being taken to fill up the flat and depressed places with wadding, so as to give a uniform surface around the joint for the bandage to act upon. — (*Revue de thérap.*) *N. Y. Med. Times*, Aug.

Cocaine Used in the Extraction of a Bullet.—At Swansea a bullet has been removed from a would-be suicide, cocaine being used to deaden sensation. The bullet traversed the chest almost in a direct line and became embedded in the thick muscles of the back by the side of the spine, sufficiently superficial to be felt; therefore the amount of dissection necessary for its removal was very little, certainly not half an inch in depth. The cocaine was successful in removing all sensation from the part to which it was applied; but Mr. Joseph Davies, under whose care the patient lies, states that it exhibited no other property than, as is within the knowledge and experience of most surgeons, has already been demonstrated with regard to its power when employed for small operations on the eye, etc., and in the removal of small tumors.—*London Lancet*, Aug. 29th.

Treatment of Nævus by Ethylate of Sodium.—For some months past ethylate of sodium has been extensively employed by me in the treatment of cases of nævus occurring in children, and up to the present I have every reason to be satisfied with its use. I paint over the nævus two coatings of the ethylate on two consecutive days, taking care to protect the surrounding skin before the application, and in all instances of superficial nævi thus treated, have found them cured on the separation of the scab. Those cases affecting the subcutaneous tissues generally require a second, or even in some cases a third, repetition of the remedy.

It seems to leave less scar than nitric acid, to cause less pain to the child, and, undoubtedly, of all applications, is the one least dreaded by the mother.—(Samuel Welch, M. R. C. S.) *Brit. Med. Jour.*, Aug. 22d.

Drainage of Wounds.—Mons. Houzel, of Paris, has devised an ingenious application of drainage to the antiseptic treatment of wounds. Two-inch rubber drainage-tubes are placed in the wound, and the part in contact with the wound presents numerous apertures. The other end is placed in a receptacle containing the antiseptic solution, below the level of the wound; this arrangement establishes a suction movement which withdraws the pus. An antiseptic dressing is also used to protect the wound from air.—*Medical World.*

Resection of the Sternum for Retro-Sternal Abscess.—M. le Fort communicated an interesting case of resection of the sternum for retro-sternal abscess in a man of middle life. The general state of the patient was very grave, death being imminent from suffocation. Two inches and a half of the bone was resected, and a considerable amount of pus evacuated. The patient, who only consented to the operation with the hope of dying under it, refused all nourishment and tore off the dressing several times. On the third day he died, and the autopsy showed that operation was well done, the mediastinum not being in any way interfered with. —(Paris Letter) *London Med. Press.*

Plaster-of-Paris Dressing.—Dr. G. Krosz writes to the *Deutsch med. Zeit.*, that the removal of a plaster-of-Paris dressing is greatly facilitated by first scraping a groove with a knife, and then dropping along it a solution of caustic soda. In a few minutes the plaster becomes pulpy along this line, and the bandage can then easily be cut through. If two lateral grooves be made, instead of one, a lid can be cut out of the bandage, the leg can be lifted up for the necessary inspection and returned, the lid being reapplied and retained with a roller bandage. In this way the plaster dressing is not cracked, and the limb is not jolted in the effort to remove the bandage. By this method, also, it is a very easy matter to cut any fenestra that may be needed.—*Med. and Surg. Rep.*, Aug. 22d.

Union of Fractured Teeth. — Dr. Wingate reports eight cases of united fractures in teeth from Carbondale, where there is a large class of miners amongst whom

accidents are common. As these teeth were all extracted on account of the pain and discomfort caused by their distorted shape, it is probable that united fractures in teeth are much more common than has been supposed, for these teeth represent the failures only ; the successful cases, not giving trouble, were never recognized.—*London Med. Times*, Aug. 8th.

Antiseptic Ointment. — Dr. E. B. Ward, of Greensboro, Ala., writes : The antiseptic ointment mentioned in your last paper by Dr. M. B. Ward is very much like the one I have been using for some time in my practice. The one I use and which has given splendid results in wounds and sores, is composed of iodoform, subnitrate of bismuth, and vaseline. For chronic ulcers I add calomel to this. I have had wounds heal very readily with this ointment."—*N. Y. Med. Record*, Aug. 15th.

MISCELLANEA.

Explosive Physic.—A list has just been published, in the *Union Pharmaceutique*, of accidents which have recently occurred during the preparation or carriage of explosive substances used in medicine. At Strassburg, a chemist's assistant was changing some lycopodium powder from one bottle to another ; the particles that escaped mixed with the air, a jet of gas was burning, and a slight explosion occurred. The frightened assistant dropped the jar containing the lycopodium, the room was at once filled with the powder, and a violent explosion took place. Chlorate and permanganate of potash are also dangerous. M. Meyet has stated that a tooth-powder composed of chlorate of potash and cachou has been known to explode in the mouth of a person engaged in brushing the teeth. A druggist who dried some hypophosphite of lime in a receptacle containing sand was killed by the explosion. Oxalate and citrate of lime are also explosive, but only at a high temperature. Pills of permanganate of potash have been known to explode spontaneously. A mixture of perchloride of iron and glycerine exploded in the pocket of a patient who carried it. An eminent chemist at Paris prepared ozone with powders composed of equal parts of peroxide of manganese, permanganate of potassium, and pulverized oxalic acid. He took every recognized precaution, and the mixture was corked up in a bottle ; a few minutes afterwards, an explosion took place, and the bottle was reduced to atoms. — *British Med. Jour.*, Aug. 1st.

Sozone.—Dr. Stoneroad has been prescribing a combination to which he gives the above title, for fifteen years, in pulmonary affections, and recommends the same to the serious consideration of the medical profession.

A study of the formula, given on a former page, in this number, would seem to warrant the conclusion to which the Dr. has arrived.

Anæsthetics—Good, Bad, and Indifferent.—Dr. B. W. Richardson has recently published a summary of the anæsthetics, from which we condense the following :—

Considered safe : ethyl bromide, ethyl chloride, ether, ethene (olefiant gas), ethene chloride, methyl bromide, methyl chloride, methyl ether, methene chloride, methene (marsh gas), nitrous oxide.

Of doubtful value : amylene, amyl chloride, butyl chloride, benzene (benzol), carbon disulphide, carbon dioxide, carbon tetrachloride, methyl alcohol, methylal, spirits of turpentine.

Dangerous : amyl hydride, butyl hydride, carbon monoxide, ethyl hydride. Chloroform and ethene dichloride are regarded as useful, but requiring care. Dr. Richardson considers methylic ether to be the safest of all the anæsthetics.—*The Polyclinic*, Aug.

"Colden's Liquid Beef Tonic."—I certify that I have used largely in debility, febrile and nervous diseases, and that I have found it one of the most reliable of our nutrient tonics now in use or to be found in pharmacy.—JOHN J. CALDWELL, M.D., 71 N. Charles St., Baltimore, Jan. 20, 1875.

Test for Codeine.—Recently we announced the discovery of a new reaction of digitaline (*The Lancet*, July 4th) by M. Lafon. This chemist now comes forward with a characteristic test for codeine. A minute quantity, even a fraction of a milligramme, of codeine imparts a splendid green color to a solution of one gramme of selenite of ammonium in twenty cubic centimetres of strong sulphuric acid. It appears that morphia is the only known alkaloid that gives any thing like the same

reaction. When selenium is dissolved in strong sulphuric acid, the green color is the result; and codeine is said to have the power of setting selenium free from the ammonic salt.—*London Lancet*, Aug. 15th.

Inflammation, Locally. — John W. Martin, M.D., Sheffield, says: The following is an excellent lotion for subduing inflammation, and reducing the œdema of the inflamed parts:

℞	Tr. opii camph. co	ʒ ij.	
	Tr. tolutani	ʒ ij.	
	Liq. plumbi diacetat	ʒ iv.	
	Glycerin.	ʒ ij.	
	Aquam ad.	ʒ xx.	M.

A piece of lint, or old linen, to be well wetted with the lotion, and to be applied to the inflamed part. The wetting to be repeated at frequent intervals.

Internally, it is useful to combine the following with the use of the foregoing lotion:

℞	Potass bicarb.	ʒ iss.	
	Tr. nucis vom.	♏xl.	
	Ferri am. cit.	ʒ iss.	
	Sp. am. aromat.	ʒ iss.	
	Aquam ad.	℥ viij.	M.

ʒ j. three or four times a day.

I have found this treatment especially useful in those cases in which intense inflammation in the arms follows re-vaccination.—*London Med. News.*

Acute Rheumatism — Liniment. — In acute rheumatism, methyl salicylate (oil of winter-green), mixed with an equal bulk of linimentum saponis, and applied to the inflamed joints, is stated to afford immediate relief.—*Birmingham Med. Rev.*, Aug.

Iodide of Sodium and Calomel in Conjunctivitis.—For inflammations of the conjunctiva A. Bellyarminov, writing in the Russian *Ophthalmic Review*, advises the employment of iodide of sodium in large doses internally, and local treatment at the same time by blowing calomel into the conjunctival sac. This produces, after the second application, a swelling of the eyelids and of the conjunctivæ. Sometimes, also, streaks of yellowish scales may be seen on the conjunctivæ, but they fall off in three days, and by that time all the inflammation is found to have disappeared. — *London Lancet*, Aug. 29th.

Uric-Acid Diathesis—Lithiated Hydrangea.—Lambert's Hydrangea preparation is compounded scientifically, and has established a first-class reputation in kidney affections.

The *anti-lithic* properties neutralize the uric acid in the blood, in gout, rheumatism, and other conditions where the urine is of a red tinge and acts upon alkaline test paper.

Cocaine Mydriasis Antagonized.—The paralysis of accommodation and the dilatation of the pupil caused by cocaine when used to anæsthetize the conjunctiva may not be desired. According to Dr. Bradford, a combination of pilocarpine and cocaine produces anæsthesia without altering the pupil or accommodation. Ten drops of a 4-per-cent. solution of hydrochlorate of pilocarpine are added to a drachm of a 4-per-cent. solution of hydrochlorate of cocaine in order to make the required agent.—*London Lancet*, Aug. 15th.

Vin Mariani.—Is attested by some of the leading physicians, in all Europe, as a perfectly reliable diffusible stimulant and tonic, devoid of any unpleasant reactionary effects, which is a very important item where wine is indicated.

Camphor Inhalations.—A writer in *El Siglo Medico* strongly recommends the following as a certain means of relieving the discomfort incident to cold: Pour about half a pint of boiling hot water over about a drachm of pulverized camphor, and inhale the vapors arising therefrom for from ten to twenty minutes.

Great relief is at once experienced, and after two or three repetitions the discomfort is said to disappear entirely.—(*Gazzetta degli Ospitali.*) *Med. News.*

Dying Declarations.—Chas. Gross, F.R.C.S., Eng., writes:—In the Notes of Cases in Obstetric Jurisprudence of August 8th, Case 12, page 244, Dr. Braxton Hicks writes as follows: "In cases where the only evidence is derived from one who is dead, it is impossible to convict unless the dying statements are taken by a magistrate." I would point out that this is a very prevalent mistake, and one calculated often to cause a serious failure of justice. It cannot be too clearly known, especially to medical men, that, provided the declarant conscientiously believes that he has no hope of recovery, *any one* may take down his dying declaration, and such declaration properly attested is admissible as evidence just as

much as if taken on oath by a magistrate. —*London Lancet*, Aug. 15th.

Coniine in the Treatment of Cough. —The *Centralblatt für die gesammte Therapie* publishes the following formula :

Coniine hydrobromate, } each . . 15 grains.
Sugar of milk, }
Mucilage of gum arabic, a sufficient quantity.

Divide into forty pills, from two to four of which are to be given daily for nocturnal convulsive cough

—*N. Y. Med. Jour.*, Aug. 1st.

Strychnia in Malarial Fevers.—W. W. Reynolds, M.D., Proctorville, Ohio, writes : Never having seen an account of the use of strychnia in malarial fevers, I thought I would give my experience with it. Having tried quinine in heroic doses, and so often having a return of the disease, I concluded to experiment, and at last combined quinine and strychnia. This resulted admirably, and I continued to reduce the amount of quinine, until now I give no quinine at all in "chills and fever." I invariably give ℞. Liq. strychniæ, ♏x., before each meal ; and I have yet the first chill to see after the commencement of the remedy.—*Med. and Surg. Rep.*, Aug. 22d.

Mellin's Food for Infants and Invalids.—It is conceded that the mortality from cholera infantum and cholera morbus, during the recent hot weather, would have been infinitely greater had it not been within the reach of all to substitute this well-known food, in place of the many questionable articles on the market.

Diphtheria—Syr. Chloral Locally. —In a report of eight cases of diphtheria by H. C. Alderton, of London, he had the best effect from the use of syrup of hydrate of chloral locally with soda sulpho-carbolate and stimulants internally. The syrup of chloral removed the livid condition of the throat, and the pain of swallowing seemed to be less.—*Western Med. Rep.*, Aug.

Anodyne Counter-Irritation. — Dr. Richardson, on the theory that if by strong counter-irritation the surface of the body, in any part, were rendered very vascular, the absorption of a narcotic applied to that surface caused a local insensibility much more intense than if the narcotic had been simply placed on the skin in its natural state, combines a narcotic with a counter-irritant, as follows :

1. Mustard, four tablespoonfuls ; tincture of opium, two fluid drachms ; glycerine, one tablespoonful ; water, heated to 100 degrees F. To be applied on sponge or linen in the usual way.

2. Mustard, four tablespoonfuls ; soda carbonate, half an ounce ; Dover's powder, one drachm ; glycerine, one tablespoonful ; water, heated, sufficient to make a poultice. This forms an alkaline as well as anodyne counter-irritant for lumbago and muscular pains.

3. Cantharidine plaster, one drachm ; extract of belladonna, one grain. To make an anodyne blister. This is useful for the blister at the back of the ear, in cases of pain from subacute inflammation.

4. Emplastrum calefaciens (emplastrum picis cum cantharide, U. S.) is a good medium for anodyne counter-irritation. With it morphia, codeia, and other alkaloids combine well, on addition of a little glycerine.—*Jour. Amer. Med. Ass'n.*

Traumatic Hemorrhage into the Internal Ear.—Hardwicke reports a case of this kind in a lad, aged seventeen, who was brought to the hospital at Sheffield completely deaf in one ear ; the deafness had occurred four days previously from a blow on the side of the head with a cricket-ball. The watch could not be heard in the right ear, neither could the tuning-fork. Nothing abnormal was found in the pharyngeal mucous membrane or the middle ears. A diagnosis was made of hemorrhage into the cochlea or semicircular canals. The treatment consisted in the application of leeches to the tragus, a blister behind the ear, and potassium iodide internally. The patient left the hospital cured on the eighth day.—*N. Y. Med. Jour.*, Aug. 22d.

Pulmonary Consumption — Syr. Hypophos. Comp., Fellows'.— Of course, when the tissue of the lung is once destroyed, it is a very serious condition of things to the patient ; but if he will commence, when the first symptoms appear indicating pulmonary disturbance, with the syrup, it will fortify the system against the progress of the disease, and, with change of climate, will give every hope of recovery.

Novel System of Drainage.—Albany, Ga., has been ingeniously relieved of what has long been a troublesome nuisance to her in the shape of a stagnant pond of water, which covered from one to two

acres. The *News and Advertiser* says that it was all cleared off, and the bottom made perfectly dry, by Captain J. G. Stephens, the faithful and efficient chairman of the Street Committee of the present City Council, who had a derrick and windlass erected near the edge of the pond, and put a force of hands to drilling a hole into the ground, on the same principle that artesian wells are bored. His object was to find a subterranean stream or passage, into which the pond could be drained. Such a passage was found at a depth of thirty-three feet, and then a square well was dug down to it and curbed all the way. Every thing being ready, a ditch was dug, and the water from the pond was turned into the well. It ran in through a twelve-inch terra-cotta pipe at the rate of about six hundred gallons per minute, and disappeared as fast as it reached the bottom of the well.—*Sanitarian.*

Kaolin.—Kaolin has frequently been mentioned in these columns as a coating for pills, particularly of potassium permanganate, but we find, from the number of inquiries made to us, that very indefinite ideas exist as to what kaolin actually is. Kaolin is a sort of clay which is the product of a decomposition of feldspar and quartz-rock, found in low, swampy ground, beneath the surface of the soil. Large beds of kaolin exist in Chester County, Pa., and Newcastle, Del., from which places nearly twenty thousand tons are mined and prepared, and then shipped to all parts of the country. It is prepared by simply washing with water and exposing to the air.—*Therap. Gaz.*, Aug.

Debility of Convalescents — Beef Peptonoids.—Carnrick's preparation is spoken of by Prof. Tichborne, of Dublin, as the most concentrated nitrogenous food yet presented, and consisting of 95 per cent. of assimilable solids of the most nutritious character. This is near enough to perfection, for our purposes.

Mustard-Sponge.—In referring to sponge as a carrier of poultices, Dr. Richardson considers that it makes the best of mustard-carriers. The nurse mixes the mustard in a basin with water until the mass is smooth and of even consistency. Then she takes the soft mass all up with a clean sponge, lays the sponge in the centre of a soft white handkerchief, ties up the corners of the handkerchief neatly to form a hold, and applies the smooth convex surface to the skin. This mustard-sponge, warmed again by the fire and slightly moistened, can be applied three or four times, is good for several hours, and saves the trouble of making a new poultice for reapplication, often a matter of importance during the weariness of night-watching. The sponge can afterward easily be washed clean in warm water. It is scarcely necessary to add that this method will save both time and trouble, and that the same sponge may be used frequently.

Injections of Ether and Iodoform in Cold Abscess.—Professor Verneuil obtains a rapid cure in almost all his cases of cold abscess, abscess from diseased bone or from congestion, etc., by ethereal injections of iodoform of the strength of one in twenty. The abscess is first emptied by means of Potain's aspirator, and then receives from 100 to 300 grammes of the iodoform solution. By not exceeding this quantity—that is, five to fifteen grammes of iodoform—no fear of accidents need be felt. The liquid penetrates into all the anfractuosities and diverticula of the abscess, the ether becoming absorbed or evaporated, and the antiseptic agent being deposited uniformly on the pyogenic membrane, the action of which it modifies. This simple means, so exempt from danger and so easy of application, has proved highly successful; very large abscesses have yielded to three or four injections.—*Revue de Therapeutique—Practitioner.*

Asclepiad—Important to Surgeons —Mineral Earth.—The National Pharmacal Association, of Baltimore, is constantly in receipt of letters endorsing mineral earth in the treatment of gun-shot wounds, scalds and burns, ulcers, erysipelas, diseases of the skin, vaginitis, syphilitic sores, and bleeding fungus of breast.

For further information send for pamphlet.

Atropia in Chloroform Inhalation.—Referring to death by syncope during anæsthesia by chloroform, Poirier (*Le Progrès médical*) refers to the experiments of MM. Dastre and Morat, in which they utilize the known powers of belladonna to paralyze the moderator nerves of the heart. Experiments were first made on dogs, and the results obtained were so encouraging

that Aubert, Gayet, and Tripier, surgeons of Lyons, were induced to try it on the human subject, and they obtained gratifying results. The following solution was employed :

Atropiæ sulph.	$\frac{1}{14}$ gr.
Morphiæ hydrochlo. . . .	$1\frac{1}{2}$ grs.
Aquæ dest.	$2\frac{1}{2}$ 3

Hypodermic injection of a Pravaz syringeful was given from twenty to thirty minutes before the inhalation of the chloroform. The advantages of this procedure, which is now daily practised in the hospitals of Lyons, are the following : security, greater rapidity with which anæsthesia is produced, absolute quiet of the patient, ease with which consciousness returns, and simplicity of results. — *Midland Medical Miscellany.*

Diagnosis of Apparent Death.—M. Bush, in the *Centralbl. f. Nervenheilkunde*, suggests the application of the faradic current to different parts of the body, in order to excite contraction of the muscles. If the attempt is successful, a surface thermometer, or an ordinary thermometer with proper precautions, is placed and retained upon the skin for from three to five minutes, while contraction of the subjacent muscles is maintained. If the temperature rises, the person is alive.

A second method suggested is the following : In normal conditions, violent mechanical excitation, as pinching of the skin, determines a rise of temperature in an extensive circuit by vascular reflex dilatation, and the same phenomenon is observed after application of snow or ice. Nothing similar occurs in a corpse. The author has not, however, had opportunity to test the correctness of his theory upon any case of apparent death.—(*Archives de Neurol.*) *Phila. Med. News*, Aug. 15th.

Malt Whiskey for Medicinal Purposes.—Dr. M. E. Arendt, Analytical and Consulting Chemist, Buffalo, N. Y., writes that he has made an analysis of Duffy's Malt Whiskey, which gave very gratifying results.

He pronounces it to be entirely free from fusel oil or any other obnoxious elements so often found in alcoholic liquors.

Iron in Egg Yelk.—G. Bunge, in the *Zeit. Physiol. Chem.*, describes experiments on the form in which iron exists in egg yelk. He is led to believe that food does not contain iron in inorganic combinations, but that it only exists in complex organic compounds which have been formed by the vital processes. It is absorbed and assimilated in this form, and then converted into hæmoglobin. This is, he is aware, apparently at variance with the observations of practical physicians. The apparent contradiction may, he thinks, be explained by the hypothesis that inorganic iron salts prevent the decomposition of the organic iron compounds in the intestinal canal.—*Med. and Surg. Rep.*, Aug. 1st.

Nerve Food — Vitalized Phosphites.—This now well-known preparation continues to increase in professional favor as a tonic to the nerves generally, and especially in the treatment of insomnia, neuralgia, dentition, and chorea.

We should expect excellent results from the use of the vitalized phosphites in the average case of St. Vitus' dance, a typical condition of atony of the nerve centres.

Thirst Quencher.—Take of :

Lactic acid,	
Diluted phosphoric acid, āā .	6 drams.
Oil of orange	40 drops.
Egg albumen	1 ounce.
Syrupus simplex, q. s. ad. .	32 ounces. M.

Use the same as a regular soda syrup. It makes a very fine drink, being cooling and a thirst quencher. — *Indiana Pharmacist*, Aug.

Terpine and Terpinol.—The Paris correspondent of an English exchange tells us that at a recent meeting of the Société de Thérapeutique, Dr. Dujardin-Beaumetz recalled the fact that in treating turpentine with an alkaline carbonate, a substance is obtained to which the name of "terpine" has been given. This substance has been experimented with by Dr. Lépine, of Lyons, who ascertained that it is endowed with very marked diuretic properties, and that it modifies the bronchial secretion in old catarrhal affections. Dr. Dujardin-Beaumetz has since experimented with a derivative of terpine, namely, terpinol, which is made by reacting on the former with sulphuric acid. Terpinol is described as being an oily substance, having an odor of jasmine, and being but little soluble in water. Dr. Dujardin-Beaumetz prescribes it in the form of pills as follows : Terpinol, benzoate of soda, of each sixteen grains ; powdered sugar, q. s. ; to be divided into ten pills, of which as many as ten can be administered daily. Terpinol is

eliminated almost exclusively by the air-passages, and gives to the breath a strong odor of jasmine. It exercises its action principally on the bronchial secretions, which it rapidly fluidifies.—*Med. and Surg. Rep.*, Aug. 22d.

Waters of Life, for Diabetics.—The water of the Waukesha Glenn Natural Spring known as the "Queen of Waters," is claimed to reign supreme among natural dietetic table waters, and maintains one temperature, 48°, both summer and winter.

Thousands of testimonials, from invalids suffering from various urinary complaints, have been received by Mr. Bryant.

The fact that no zymotic diseases can be contracted by drinking the Waukesha water, has made this place a favorite Western summer resort.

Use of Chloroform.—In Dr. Pean's clinic, in Paris, chloroform is given with perfect safety by using an instrument which insures eight per cent., of chloroform to the air breathed. The great danger in administering chloroform is the shutting out of the necessary amount of air.—*N. Y. Med. Record*, Aug. 8th.

Acid Mannate. — Teaspoonful doses three times a day of Acid Mannate will keep the bowels in a soluble condition, favor the secretion of bile, and gradually remove the congested and torpid condition of the liver.—Address Rio Chemical Co., St. Louis.

Test for Citric Acid.—C. Mann states in the *Zeit. Anal. Chem.* that if citric acid be evaporated to dryness with glycerol, treated with aqueous ammonia, and again dried, it gives a deep-green color, with peroxide of hydrogen. Nitric acid if similarly treated also yields a green color, but this changes to dark blue on warming. Tartaric and malic acids give no reaction.—*London Med. Times*, August 15th.

Maltopepsine.—Tilden & Co. call the attention of the profession to this important remedial agent for indigestion, constipation, dyspepsia, vomiting in pregnancy, loss of appetite, and all forms of gastric derangements, and atonic conditions of the alimentary organs.

The Maltopepsine combines the diastase, pepsine, lactic acid, phosphoric acid, sugar of milk, and other digestive and nutritive properties of the grain, all ready for assimilation, without putting the organs to the trouble of digesting them.

Palatable Benzoic-Acid Solution.—The following is proposed by M. Pierre Vigier: Benzoic acid 1 or 2 parts, canella water 50, syrup of tolu 100, and distilled water 850 parts. Dissolve the acid in the water and mix. For those who do not like a sweet taste, the syrup of tolu may be replaced by brandy. A tumblerful in the 24 hours.—*N. Y. Med. Jour.*

Luminous Signs.—Since Morgan is supplying so many luminous door plates, house numbers, street names, bell plates, and doctors' signs, the Clerk of the Weather does not have to bother himself so much about lighting up the moon and hanging it in a conspicuous place.

Moth Preventive.—

Black pepper, Camphor	āā	1 ounce.
Lupulin		1 dram.
Snuff		2 ounces.
Cedar sawdust		4 ounces.

Mix well, and sprinkle over the goods you wish to preserve.

—*Indiana Pharmacist*, Aug.

Mineral Waters.—There seems little reason to doubt that when Nature undertakes to produce a medicinal water, the product is above suspicion that possibly some mistake may have been made in the prescription.

You don't try it first on some one else, to see if it is safe. You trust Dame Nature.

P. Sherer & Co., N. Y., have all her best mineral waters, and invite the profession to prescribe the medicine, if they have faith in the pharmacist.

Ammoniacal Disks as Vesicatories.—Dr. Guido Turazza, in recommending ammoniacal disks for vesication, claims the following advantages:

1. Ease of application, moderate cost, and a duration of pain much shorter than that produced by actual blisters.

2. They produce in a short time the remedial effect of blisters, and may be used in cases where a speedy result is desirable, thus possessing an advantage over blisters, and being far superior to sinapisms and cupping-glasses.

2. They may be used in cases in which blisters are contra-indicated on account of the danger of toxic effects.—(*Gazzetta degli Ospitali*) *Phila. Med. Times.*

Lactopeptine.—When the Pharmacal Association of New York put this preparation forward, they did not fully comprehend how real a service they were conferring upon dyspeptics.

But now that its merits are universally accepted, the Pharmacal Company have become aware of a left-handed compliment in the existence of imitations of their Lactopeptine.

Patients can avoid these frauds by sending their orders direct to head-quarters : P. O. Box 1574, New York City.

Lamp-Explosion.—An unhappy illustration of the danger attending the too common practice of blowing down the chimney of a partially filled oil-lamp, to extinguish the flame, has been afforded at Sedgley, where a married woman named Maria Lloyd met with a shocking death through endeavoring to extinguish a paraffin-lamp in this way. The lamp exploded, and ignited her clothing, and also that of her husband. The woman died after undergoing great agony. At the inquest on the body, a verdict of accidental death was returned. We recently called attention in these columns to the precautions which Sir Frederick Abel recommends to be observed, which would certainly have the effect of reducing, if they did not altogether remove, the risk of accidents attending the use of petroleum and paraffin oils. In order to safely extinguish an explosive lamp, it was pointed out that the flame should be lowered until only a flicker is visible, when the mouth should be brought to a level with the top of the chimney, and a sharp puff of breath projected across the opening. Had that plan been adopted in the present instance, there is little doubt that the accident, which in one case has been attended with fatal consequences, would never have occurred.—*Brit. Med. Jour.*

To Remove Immediately the Taste of Cod-Liver Oil.—Dr. Antonin Martin recommends the drinking of a large glass of water off rusty nails. Immediately the rank taste of the oil is changed to that of fresh oysters, and the unpleasant regurgitations disappear.—(*Jour. de méd. de Paris*) *Can. Pract.*

Coca Calisaya Ferro-Phos.—This is one of Cassebeer's elegant preparations, combining in a pleasant menstruum, the tonic properties of coca, iron, and the phosphites. Wherever a first-class tonic is needed this will please you, not only by its agreeable flavor, but by its curative effects.

Saliva—Test for.—A test is suggested by Dr. Dulles, for determining the character of the fluid discharged from a suspected salivary fistula. It consists in bringing a drop of the discharge into contact with a drop of the tincture of chloride of iron on a white surface—a piece of white paper will do,—when, if the discharge contains saliva, it will give the pink color which indicates the presence of the sulphocyanide of potassium, a normal ingredient of saliva.—*Med. and Surg. Rep.*

Turpentine Mixture.—The taste and smell of turpentine are best masked by sulphuric ether. A mixture of turpentine, ʒ ij; ether, ʒ j; syrup of orange, ℥ j; and water, ℥ iv, can be taken in teaspoonful doses quite readily.—*Louv. Med. News.*

Syringes.—The "*Pallas*" model, made by Jensen & Co., Phila., seems to have precedence in the market nowadays.

By reason of their peculiar and novel construction, they accomplish some important points heretofore not attained, and which it is essential to read about, at length, by sending for an illustrated circular.

Substitute for Woman's Milk.—The following is the formula suggested by Prof. Leeds, of Stevens Institute, as the best substitute for woman's milk : 1 gill of cow's milk, fresh and unskimmed ; 1 gill of water ; 2 tablespoonfuls of rich cream ; 200 grains of milk sugar ; 1¼ grains of extractum pancreatis ; 4 grains of sodium bicarbonate. "Put this in a nursing bottle, place the bottle in water made so warm that the whole hand cannot be held in it without pain longer than one minute. Keep the milk at this temperature for twenty minutes. The milk should be prepared just before using."—*Archives of Ped.*

Bromides—Relative Value.—Bromide of iron, in ten-grain doses, is superior to bromide of potassium.—*Med. Summary.*

Cholera Infantum—Nestle's Lacteous Farina.—This preparation is entitled to a share of credit for preventing diseases among those whose digestive organs are easily disarranged—especially in hot weather. Drs. Monod and Morpain, of Paris, have selected Nestle's Food as a product of the most wholesome character and preventive of intestinal irritation.

Mosquito Bites—Sol Atropine.—A solution of atropine (1 in 1,000) applied to mosquito bites relieves the itching and shortens the duration of the papulæ.—*Birmingham Med. Rev.*, Aug.

Scott's Emulsion.—It is claimed that this combination of pure cod-liver oil with the hypophosphites of lime and soda can be longer tolerated by children and others with delicate stomachs, than any other preparation known.

This is an important point to remember in selecting a remedy.

Painless Caustic.—A saturated solution of the hydro-chlorate of cocaine in nitric acid, is said to make a painless caustic.—*Cin. Lan. and Clin.*, Aug. 29th.

Phosphopeptine in Typhoid.—The credit of compounding this very valuable preparation belongs to C. A. Higgins. Flemington, N. J., who will send you the formula, with full directions, if you send him your address.

Detection of Oleomargarine.—The following test for oleomargarine is as reliable as simple. A few drops of sulphuric acid when placed on genuine butter produce first a yellowish-white and after ten minutes a brick-color, while oleomargarine treated in the same manner assumes first an amber and later a crimson color.—*Therap. Gaz.*

Artificial Limbs.—It would be necessary for us to issue a special edition of the ANALECTIC to convey an adequate idea of the material described in the pamphlet and supplement, embodying one hundred and sixty pages, octavo, illustrated, issued by A. A. Marks, 701 Broadway, N. Y. City.

As this will be sent free, to all, upon application, we advise every one interested to apply at once.

The book is beautifully illustrated and replete with ingenious ideas.

Surgical Bandages.—The variety of goods made by Messrs. Hastings & Garson, Phila., must be seen to be appreciated.

Next to seeing them, is to send for their illustrated circular.

Yorkville Road-Cart.—The manufacturer of this cart desires you to send for his illustrated circular. Address W. R. Church, Yorkville, Ill.

Sponge Poultice.—A sponge poultice has some advantage above all others, and is made as follows: Make a flannel bag three inches wide, and as long as any given affection requires. Fill this bag with small bits of sponge; then soak in hot or cold water, as the case may need; cover the outside with layers of cotton-batting, and over this some water-proof material. This poultice is elastic, and may be kept constantly near the skin, and will keep the throat at a uniform temperature,—a very important point in diphtheria and scarlatina, and all other maladies in which suppuration exists. Cold sponge poultices may be applied in the early stages of scarlatina and diphtheria to lessen the tendency to inflammation.—*Hall's Journal of Health.*

Peacock Chemical Co., St. Louis, have some valuable preparations.

See their circular.

Uterine Displacements are remedied by J. W. Dawson's appliances. Send your address for all information, to Chicago, Ill., and receive his illustrated circular.

BOOK NOTICES.

Treatise on Nervous Diseases; their Symptoms and Treatment.—A text-book for students and practitioners. By Samuel G. Webber, M.D., Clinical Instructor in Nervous Diseases, Harvard Medical School, etc. New York: D. Appleton & Co., 1885. Pp. ix–415.

Use of the Microscope in Clinical and Pathological Examinations.—By Dr. Carl Friedlaender, Privat-Docent in Pathological Anatomy at Berlin. Second edition, enlarged and improved, with a chromo-lithograph. Translated, with the permission of the author, by Henry C. Coe, M.D., M.R.C.S., L.R.C.P. (London), Pathologist to the Woman's Hospital in the State of New York. New York: D. Appleton & Co., Pp. x–195.

Complete Pronouncing Medical Dictionary: Embracing the Terminology of Medicine and the Kindred Sciences, with their Signification, Etymology, and Pronunciation. With an Appendix, Comprising an Explanation of the Latin Terms and Phrases Occurring in Medicine, Anatomy, Pharmacy, etc.; together with the Necessary Directions for Writing Latin Prescriptions, etc. By Joseph Thomas, M.D., LL.D., Author of the System of Pronunciation in Lippincott's "Pronouncing Gazetteer of the World," On the Basis of Thomas' "Comprehensive Pronouncing Medical Dictionary." Philadelphia: J. B. Lippincott Company, 1886. Pp. 844.

Acne: Its Ætiology, Pathology, and Treatment.—A Practical Treatise Based on the Study of One Thousand Five Hundred Cases of Sebaceous Disease. By L. Duncan Bulkley, A.M., M.D., Physician to the New York Skin and Cancer Hospital, etc. New York and London: G. P. Putnam's Sons, 1885. Pp. x–280. Price, $2.

CROSBY'S

Vitalized Phosphites

COMPOSED OF THE NERVE-GIVING PRINCIPLES OF THE

OX BRAIN AND OF THE EMBRYO OF THE WHEAT AND OAT

THIS is a standard preparation with all physicians who treat nervous or mental disorders. It is not a secret, the formula is on every label. Its careful chemical composition has been superintended for thirteen years by a Professor of Materia Medica, and its correct analysis vouched for by a Professor of Chemistry. Physicians alone have prescribed over a million bottles, curing nervous derangements and debility.

It aids in the bodily, and wonderfully in the mental, growth of children.

Crosby's Vitalized Phosphites Should be Taken as a Special Brain Food.

"To build up worn-out nerves, to banish sleeplessness, neuralgia, and sick headache. I have not had a severe headache since I began its use; it was my great trouble before."—Dr. GWYNN.

"To promote good digestion."—Dr. FILMORE.

"To restore the energy lost by nervousness, debility, over-exertion, or enervated vital power."—Dr. W. S. WELLS.

"To 'make life a pleasure, not a daily suffering.' I really urge you to put it to the test."—Miss EMILY FAITHFUL.

"To amplify bodily and mental power to the present generation and prove 'the survival of the fittest' to the next."—BISMARCK.

"To strengthen nervous power. It is the only medical relief I have ever known for an overworked brain."—GLADSTONE.

"There is no other Vital Phosphite; none that is extracted from living vegetable and animal tissues."—T. CASPER, M.D.

It is a SPECIFIC for night-sweats.

F. CROSBY CO., 56 West 25th Street, N. Y.

For Sale by Druggists, or by Mail $1.

IMPORTANT EXTRACT

TAKEN FROM

ZIEMSSEN'S CYCLOPÆDIA OF MEDICINE, VOLUME VII.,

ON THE TREATMENT OF

Cholera Infantum.

In an article on Sporadic Cholera, in the volume referred to, the writer says: "Regulation "of the diet constitutes, in fact, the principal method of treatment of sporadic cholera, and par- "ticularly cholera infantum. When the mother's milk is insufficient, NESTLÉ'S LACTEOUS "FARINA OR MILK FOOD is alone to be recommended. This food is especially commend- "able, because the physiological relations of the infantile digestive organs, particularly the lack "of notable salivary and pancreatic secretions, are taken into account in its fabrication, the "starch contained in it having been transformed into dextrin."

Among the French Specialists, Drs. Monod and Morpain have indicated Nestlé's Food specially as a product of the most wholesome character, and ENTIRELY preventive of Diarrhœa and intestinal inflammation.

We have a very gratifying number of letters from physicians testifying to the successful use of Nestlé's Food in cases of Cholera Infantum during the intense heat of the latter part of July. One doctor of eminence writes: "There is no excuse for losing children with cholera infantum "where means exist to procure Nestlé's Milk Food."

THOMAS LEEMING & CO., Sole Agents,
18 College Place, New York.

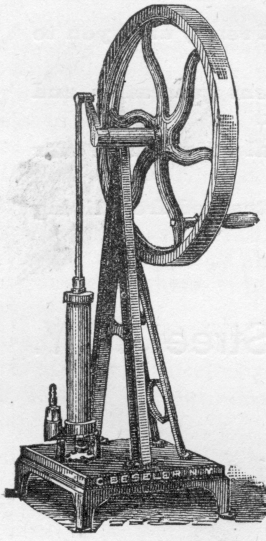
CAUTION.—There are several imitations of Nestle's Food under other names. Ask for Nestle's and take no other.

NOVELTY AIR-PUMP

FOR ATOMIZING PURPOSES.

PATENTED NOV. 18, 1884. SEND FOR CIRCULAR.

CHAS. BESELER,



218 Centre St.,

NEAR GRAND,

NEW YORK,

Manufacturer of Apparatus for Making and Administering Pure Oxygen Gas.

Compressed-Air Atomizing Apparatus and Laryngoscopes.

Strictly pure Oxygen Gas, or any desired mixture of Oxygen and Nitrogen Monoxide, compressed in cylinders, sent to any part of the United States.

"Oxygen as a Remedial Agent" will be mailed upon receipt of 25 cents.

The superiority of these Chairs is attested by thousands of testimonials.

NEW HAVEN FOLDING CHAIR CO.,

New Haven, Conn.,

MANUFACTURERS OF

INVALID

RECLINING CHAIRS

ON WHEELS.

Occupant can lie down or sit erect in it.

Send for Price List.

Mention this Paper.

Important to Physicians.

MEDICAL PRACTICES, LOCATIONS, and DRUG STORES

BOUGHT, SOLD, OR EXCHANGED

In any part of the United States and Canada.

Send stamp for particulars to

THE MEDICAL ADVERTISER,
Burlington, Vt.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

Recent Medical Publications,

COMPRISING THE MORE IMPORTANT WORKS LATELY ISSUED IN THE UNITED STATES AND GREAT BRITAIN.

ALL BOOKS IN THIS LIST ARE BOUND IN CLOTH EXCEPT WHERE OTHERWISE SPECIALLY STATED.

Althaus (Julius). Sclerosis of the Spinal Cord. $2 75
Anstie (F. E.). Neuralgia, etc. 12mo 1 25
Bramwell (Byron). Diseases of the Heart and Thoracic Aorta. 8vo . . . 8 00
Bryant (Thomas). Practice of Surgery. Cloth, $6.50; sheep 7 50
Bulkley (L. D.). Acne and its Treatment. Cloth 2 00
Burnett (Charles H.). A Treatise on the Ear. Second edition. Cloth, $4.50; sheep . 5 50
Clouston (T. S.). Clinical Lectures on Mental Diseases 4 00
Cripps (H.). Diseases of Rectum and Anus 4 50
Draper (John C.). Medical Physics. Cloth 4 00
Dowse (Thos. S.). The Brain and the Nerves 1 50
——— Syphilis of the Brain and Spinal Cord 3 00
Emmett (T. A.). The Principles and Practice of Gynæcology. Third edition. Thoroughly Revised. Cloth, $5.00; sheep 6 00
Erichsen (J. E.) Science and Art of Surgery. 2 vols. Cloth, $9.00; sheep . . 11 00
Flint (Austin, Jr.). Human Physiology 6 00
Hamilton (F. H.). On Fractures and Dislocations. New edition. Cloth, $5.50; sheep 6 50
Heath (C.). Practical Anatomy 5 00
Jones (H. MacNaughton). Diseases of Women and Uterine Therapeutics. . . 3 00
Juler (H. E.). Ophthalmic Science and Practice 4 50
King (A. F. A.). Manual of Obstetrics 2 00
Kitchen (J. M. W.). Students' Manual of Diseases of the Nose and Throat. 12mo . 1 00
——— Consumption. 12mo 1 25
Knapp (H.). Cocaine, and its Use in Ophthalmic and General Surgery . . 75
Landois & Stirling. Manual of Human Physiology. Vol. I. 4 50
——— ——— Manual of Human Physiology. Vol. II. Cloth 5 50
Lefferts (G. M.). A Pharmacopœia for the Diseases of the Throat and Nose . . 1 00
Loomis (Alfred L.). Practical Medicine. Cloth, $6.00; sheep 7 00
Mackenzie (M.). Diseases of Throat and Nose. Vol. 1. 8vo, cloth, $3.00; sheep . 4 00
——— do. do. do. Vol. 2. 8vo, cloth, $3.00; sheep . 4 00
Mattison (J. B.). Treatment of Opium Addiction. Cloth 50
Mitchell (S. W.). Nervous Diseases 1 75
Mundé (Paul F.). Minor Surgical Gynæcology. Second edition . . . 5 00
Parker (Willard). Cancer: its Nature and Etiology, etc. 8vo 1 50
Pinard (A.). Abdominal Palpation 1 25
Poore (Chas. T.). Osteotomy and Osteoclasis 2 50
Prudden (F. Mitchell). Manual of Practical Normal Histology. 16mo . . 1 00
Rindfleisch (Edward). Elements of Pathology 2 52
Robinson (A. R.). Manual of Dermatology. 5 00
Robinson (Beverly). Nasal Catarrh. Second edition 2 50
Roosa (D. B. St. J.). Diseases of the Ear. Sixth edition 5 00
Semple (Armand). The Diseases of Children 1 75
Smith (Eustace). Disease in Children. 1 vol. 8vo, cloth, $5.00; sheep . . 6 00
Sturgis (F. S.). Students' Manual of Venereal Diseases. Fifth edition. 16mo . . 1 25
Swanzy (H. R.). Diseases of the Eye. 3 00
Thomas (Joseph). Medical Dictionary. Cloth, $5.00; sheep 6 00
Thompson (Sir Henry). Surgery of the Urinary Organs. Paper, 75 cents; cloth . 1 25
Treves (Frederick). Intestinal Obstruction 2 00
——— Surgical Applied Anatomy. 16mo. Illus. 2 00
Van Buren & Keyes. Genito-Urinary Diseases, etc. 5 00
Von Arlt (F. R.). Diseases of the Eye 2 50
Watteville (A. de). Medical Electricity. 8vo 3 00
Webber (Samuel G.). Treatise on Nervous Diseases; their Symptoms and Treatment. Cloth 3 00
Woakes (E.). Post-Nasal Catarrh and Disease of Nose Causing Deafness. 12mo. Illus. 1 50
Wormley (Theodore G.). Micro-Chemistry of Poisons 7 50
Yeo (Gerald F.). Manual of Physiology. Cloth, $4.00; sheep 5 00

Any of the above works, or of other current medical publications, will be furnished, prepaid, on receipt of price, by

G. P. PUTNAM'S SONS,

27 AND 29 WEST 23D STREET, NEW YORK.

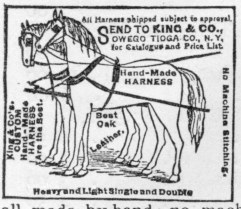
☞ In corresponding with Advertisers, please be sure and mention The Medical Analectic.

SPECIAL NOTICE.

No intelligent, wide-awake physician can afford to be without the means of knowing what are, and where to be had, all the latest improved surgical instruments and medical appliances and their cost. Such information is furnished by the superb 386 paged catalogue of 2,800 illustrations, published by JOHN REYNDERS & CO., 303 Fourth Avenue, New York. Send 15 cents to pay postage for catalogue, and mention THE MEDICAL ANALECTIC.

Bound copies at cost of binding, 60 cents.

TO PHYSICIANS.


All Harness shipped subject to approval.
SEND TO KING & CO., OWEGO TIOGA CO., N. Y. for Catalogue and Price List.
Hand-Made HARNESS
No Machine Stitching.
Best Oak Leather.
Heavy and Light Single and Double

$8.50 Will buy a single harness hand-made; $13.50 will buy a full Nickel or Davis Rubber Trimmed Harness, the best for the price in the United States; $20.00 for a Double Light Driving Harness; $30.00 will buy fine Double Harness, with full Nickel or Davis Rubber Trimmings all made by hand; no machine stitching. Pure Oak Leather, finely finished. Send to KING & CO., Owego, N. Y., for new illustrated catalogue and price list, free to all. Prices reduced from last season. Harness always shipped subject to approval.

THE GARDNER

PINE NEEDLE EXTRACT

COMPANY'S

PINE NEEDLE EXTRACT.
PINE NEEDLE OIL.
PINE NEEDLE SOAP.

"From the leaves of the Pine, a volatile OIL is distilled, which is considerably used both internally and locally as a remedy for *Chronic Catarrh*, *Chronic Skin Diseases*, *Rheumatism*, etc. An EXTRACT from the leaves is used for similar purposes."—*U. S. Dispensatory*, 1883.

The attention of Physicians is invited to these valuable products. For pamphlet, etc., address the Company, at Sharon Springs, N. Y., or their Agents, PARK & TILFORD, NEW YORK CITY.

25% discount from prices below to Physicians prescribing

Carey's Pill Petrolei Comp.

RECORD OF VITAL SIGNS.

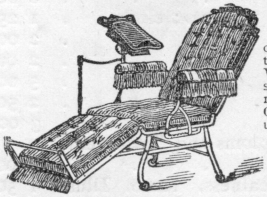
Name.....
Diagnosis.....
Date

TEMPERATURE. / PULSE.	Sun. Mor	Sun. Eve	Mon. Mor	Mon. Eve	Tue. Mor	Tue. Eve	Wed. Mor	Wed. Eve	Thur. Mor	Thur. Eve	Fri. Mor	Fri. Eve	Sat. Mor	Sat. Eve
108														
107														
106														
105														
104														
103														
102														
101														
100														
99														
170														
160														
150														
140														
130														
120														
110														
100														
90														
80														

We supply a fine linen **card**, handsome type, name, address, and office hours. On the back (as here outlined) the PHYSICIAN'S RECORD of the case, greatly aiding the physician, and giving satisfaction to a convalescent patient to show to friends. Price, 250 cards, $2.00; 500, $3.00; 1,000, $5.00, post-paid. Send Postal Note or Money Order.

CAREY & Co.,
322 E. 117th St.,
New York.

Copy. 1882 by CAREY & Co., New York. Manufacturers of CAREY'S PILL PETROLEI COMP.



NOTICE TO PHYSICIANS.

Let us send you our Catalogue of Adjustable Chairs. Very often does it confer a great favor upon your friends and patrons to know where to get the BEST and CHEAPEST Invalid's Chair. We will make it an object to you to assist us in extending their sale. Our chairs have no equal, since they are adapted to so many changes and uses. Our PHYSICIAN'S AND SURGEON'S OPERATING CHAIR is especially commendable for its particular uses. Send for illustrated Catalogue. Mention your Journal. Address

Stevens' Adjustable Chair Co.,
No. 8 Sixth St., Pittsburgh, Pa.

WOMAN'S MEDICAL COLLEGE OF THE NEW YORK INFIRMARY,

128 SECOND AVENUE, NEW YORK.

Session 1885–'86 will open October 1, 1885. Three years' graded course. Instruction by Lectures, Clinics, Recitations, and practical work, under supervision in Laboratories and Dispensary of College, is in New York Infirmary. Operations and Clinics in most of the City Hospitals and Dispensaries open to Women Students. For Catalogues, etc., address,

EMILY BLACKWELL, M.D., Dean, 128 Second Avenue.

Coca Calisaya Fluid.

Each Tablespoonful contains about 15 grains Coca Leaves and true Calisaya Bark.

Coca Calisaya Ferro-Phosphate.

Each Tablespoonful contains 1 grain of the Hypophosphites with Iron.

Coca Ointment,

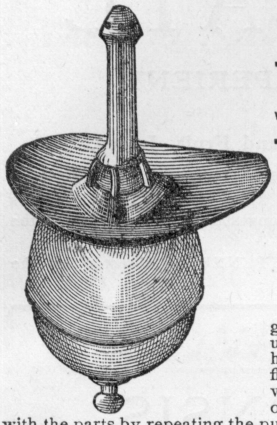
For Treatment of Wounds, Burns, Sores, Skin Diseases, Hemorrhoids, Erosions of the Mouth and Neck of the Womb, the Lubrication of Catheters, etc.

H. A. CASSEBEER, PHARMACIST,

and Importer of Rare Drugs and Medicinal Herbs, Roots, Barks, Leaves, and Seeds,

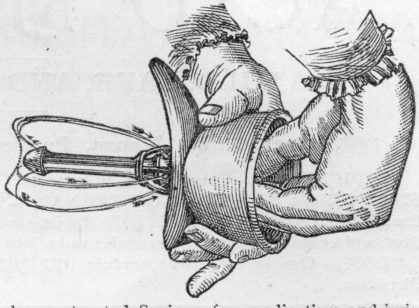
292 SIXTH AVENUE,

New York City.



"Pallas" Syringe.

VAGINAL AND RECTAL.



A most perfect and simply-constructed Syringe for medicating and irrigating the vaginal cavity. The novel bulb of this Syringe, when doubled upon itself, as shown in the cut, will cause no fluid to be left, as is so apt to happen with the ordinary bulbs, and when filled will contain just enough fluid for the expansion of the vaginal folds. The hard-rubber labial shield, with its plug, when firmly pressed upon will both prevent spilling and soiling of linen, and the fluid can therefore be kept in circulation and in contact with the parts by repeating the pumping motion of the bulb. It will also be noticed that the fluid escapes as a spray from the large holes at the point of the stem and returns through the holes at the root of same, which is provided with hard-rubber screen bars, preventing the folds from interfering with the rapid return of the fluid into the bulb. In filling the bulb, a couple of turns will unscrew it.

In a Handsome Satin-Lined Case, Retail Price, $3.75.

To Physicians, $3.00.

Kept by the Wholesale and Retail Druggists ; or it will be sent, free of express charge, on receipt of price.

Christian Jensen & Co.,

2207 Fairmount Avenue - - - PHILADELPHIA.

The Drug Trade supplied by ASCHENBACH & MILLER,

Third and Callowhill Streets, PHILADELPHIA.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

CELERINA

NERVE-TONIC, STIMULANT, AND ANTISPASMODIC.

FORMULA.—Every Fluid-Drachm represents FIVE grains EACH—Celery, Coca, Kola, Viburnum, and Aromatics.

INDICATIONS.—Impotency, Spermatorrhea, Loss of Nerve-Power (so usual with Lawyers, Preachers, Writers, and Business Men), Nervous Headache, Neuralgia, Paralysis, Dysmenorrhea, Hysteria, Opium-Habit, Inebriety, Prostatitis, Dyspepsia, and ALL LANGUID or DEBILITATED conditions of the system. *Indispensable to restore a patient after alcoholic excess.*

DOSE.—One or two teaspoonfuls three or more times a day, as directed by the Physician.

ALETRIS CORDIAL

UTERINE TONIC AND RESTORATIVE.

Prepared from the Aletris Farinosa or True Unicorn and Aromatics.

INDICATIONS.—Amenorrhea, Dysmenorrhea, Leucorrhea, Prolapsus Uteri, Sterility, to PREVENT Miscarriage, etc.

DOSE.—One teaspoonful three or four times a day.

UNRIVALLED AS A UTERINE TONIC in IRREGULAR, PAINFUL, SUPPRESSED, and EXCESSIVE MENSTRUATION.

It restores normal action to the Uterus, and imparts vigor to the entire Uterine System.

☞ Where women have aborted during previous Pregnancies, or in any case where abortion is feared, the Aletris Cordial is indicated, and should be continuously administered during entire gestation.

ACID MANNATE

A MILD, SAFE, AND PLEASANT APERIENT

☞ **Prepared from Manna, Purified Cathartic Acid, and Fruit Juices.**

INDICATIONS.—Constipation, Biliousness, Congestions, etc. INDISPENSABLE AS AN APERIENT FOR WOMEN DURING PREGNANCY. In teaspoonful doses, three times a day, it favors the SECRETION and EXCRETION of bile, and gradually removes the congested and torpid states of the liver, and keeps the bowels in a regular and soluble condition.

DOSE.—One or more teaspoonfuls BEFORE BREAKFAST or OFTENER, as directed by the Physician.

S. H. KENNEDY'S

CONCENTRATED EXTRACT OF

PINUS CANADENSIS

DARK. (A Non-Alcoholic Liquid.) WHITE.

A MOST VALUABLE NON-IRRITATING MUCOUS ASTRINGENT.

INDICATIONS.—Albuminuria, Diarrhea, Dysentery, Night-Sweats, Hemorrhages, Profuse Expectoration, Catarrh, Sore Throat, Leucorrhea and other Vaginal Diseases, Piles, Sores, Ulcers, Burns, Scalds, Gonorrhea, Gleet, etc.

WHEN USED AS AN INJECTION, TO AVOID STAINING OF LINEN, THE WHITE PINUS SHOULD BE USED.

Recommended by DR. J. MARION SIMS, and other Prominent Physicians.

SAMPLES FREE TO ANY PHYSICIAN WHO WILL PAY EXPRESS CHARGE, AND MENTION THIS JOURNAL.

RIO CHEMICAL COMPANY - - ST. LOUIS.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

LIFE-EXTENDING WATER.

"PURE WATER is only to be obtained from NATURAL SOURCES."

Vide LANCET, July 7, 1883.

The continually accumulating evidence that typhoid, diarrhœa, diphtheria, and the allied zymotic diseases and ailments are chiefly induced by the consumption of contaminated drinking-water supplied in town and country, indicates the value to the medical profession of an absolutely pure natural mineral water which can be recommended with confidence for daily use.

WAUKESHA GLENN NATURAL MINERAL WATER completely fulfils these conditions, as has been proved by the repeated examinations by the most illustrious chemists. Its entire freedom from all impurity, and its agreeable, refreshing, and digestive qualities have for many years secured its recognition and employment by the highest medical authorities as a valuable dietetic agent in daily use and as a therapeutic in illness and during convalescence.

WAUKESHA GLENN,

The Well-Known "Queen of Waters."

Reigns alone among natural dietetic table waters. Its numerous competitors appear to have, one after another, fallen away, until it has no rival.

The Only Spring in Waukesha that Remains at One Temperature

BOTH SUMMER AND WINTER—(*i. e.*, 48 Degrees).

Endorsed by the medical profession and thousands **of invalids** as the great cure for every form of

KIDNEY AND BLADDER TROUBLE,

DIABETES, Etc., Etc.

Address, T. H. BRYANT, Waukesha, Wis.

Waukesha is a most delightful Summer Resort, on the Chicago, Milwaukee, and St. Paul Railway.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

SUBSCRIBE FOR THE

ARCHIVES OF PEDIATRICS,

A MONTHLY JOURNAL DEVOTED TO THE

DISEASES OF INFANTS AND CHILDREN.

EDITED BY

WILLIAM PERRY WATSON, A.M., M.D.,

Assistant to the Chair of Diseases of Children in the New York Polyclinic.

COLLABORATORS.

J. LEWIS SMITH, M.D., of New York. J. M. KEATING, M.D., of Philadelphia. JOS. P. OLIVER, M.D., of Boston. F. FORCHHEIMER, M.D., of Cincinnati. EDW. BORCK, M.D., of St. Louis. M. P. HATFIELD, M.D., of Chicago. WM. T. PLANT, M.D., of Syracuse. H. D. INGRAHAM, M.D., of Buffalo. JEROME WALKER, M.D., of Brooklyn. JAMES F. GOODHART, M.D., of London. HENRY ASHBY, M.D., of Manchester. JAMES FINLAYSON, M.D., of Glasgow, and A. D. BLACKADER, M.D., of Montreal.

The ARCHIVES OF PEDIATRICS is the only Journal in the English language devoted exclusively to the Diseases of Infants and Children. As such, it is especially adapted to the requirements of the physician in active practice, who finds at least one third of his patients to be under seven years of age, and who could not from other sources obtain the best current medical literature on this subject without an annual expenditure of several hundred dollars, to say nothing of time and labor.

Each number contains 64 pages, making at the end of the year a volume of 768 pages, which, being carefully indexed, will form an invaluable "Encyclopedia of Pediatrics."

For 1885, arrangements have been made with eminent specialists for scientific articles on the various branches of the subject.

A series of articles on THE SURGICAL DISEASES OF THE INTESTINE IN CHILDREN, by Charles B. Kelsey, M.D., Surgeon to St. Paul's Infirmary for Diseases of the Rectum, New York, begins in the February number.

A series of articles on HIP DISEASES, by G. A. Wright, B.A., M.B., Oxon., F.R.C.S., Eng., Surgeon to the General Hospital for Sick Children, Manchester, and Assistant Surgeon to the Manchester Royal Infirmary, begins in the March number.

Other series are in preparation and will be announced in due time.

Besides these, contributions are promised during the year by all the prominent teachers and writers upon the Diseases of Early Childhood in this country and in Europe.

The ARCHIVES OF PEDIATRICS has begun the second year of its existence with very encouraging prospects. The list of subscribers has increased rapidly and steadily, and letters of praise from all parts of the country announce its favorable reception by the profession. It is therefore with entire confidence that the Journal has entered upon its second year, taking pride in its good work, and promising itself for the future such progressive changes and improvements as the development of its specialty and the interests of its patrons shall indicate.

Subscription price $3.00 in advance. Vols. 1 and 2 (1884 and 1885) to one address for $5.00.

Specimen copies sent on application.

JOHN E. POTTER & CO., PUBLISHERS,

617 Sansom St., Philadelphia.

☞ CLUB RATES WITH THIS JOURNAL $5.00

IMPORTANT RECENT PUBLICATIONS.

		Together with one year's subscription to "The Medical Analectic."
A Manual of Prescription Writing. By MATTHEW D. MANN, M.D., Lecturer on Special Therapeutics in the College of Physicians and Surgeons, New York. 16mo, cloth	$1 00	$3 20
The Student's Manual of Venereal Diseases. By FREDERIC R. STURGIS, M.D., Clinical Lecturer on Venereal Diseases in the Medical Department of the University of the City of New York, Visiting Surgeon to Charity Hospital, etc., etc. 16mo, cloth	1 25	3 25
The Student's Manual of Diseases of the Skin. By L. D. BULKLEY, M.D. Large 16mo, cloth	1 25	3 25
A Manual of Practical Normal Histology. By T. MITCHELL PRUDDEN, Director of the Physiological and Pathologicul Laboratory of the Alumni Association of the College of Physicians and Surgeons, New York, etc. 16mo, cloth	1 25	3 25
The Student's Manual of Electro-Therapeutics. By R. W. AMIDON, A.M., M.D., Lecturer on Therapeutics at the Woman's Medical College of the New York Infirmary. 16mo, cloth	1 00	3 10
Neuralgia and the Diseases that Resemble it. By FRANCIS E. ANSTIE, M.D. 12mo, cloth	1 25	3 25
The Brain and the Nerves. By THOMAS STRETCH DOWSE, M.D., F.R.C.P.E. 8vo, cloth	1 50	3 50

The subjects treated in this work comprise: The Physiology and Pathology of the Nervous System, Nervous Energy and Exhaustion, Some of the Ordinary Symptoms of "the Neurasthenic," Special Forms of Mental Derangement and Bodily Ailment due to Nervous Exhaustion, Heredity of Nervous Constitutions liable to Exhaustion and Fatigue, Treatment of Nervous Exhaustion.

G. P. PUTNAM'S SONS, NEW YORK AND LONDON. [OVER.]

NOW READY:

Acne: Its Etiology, Pathology, and Treatment. A Practical Treatise, Based on the Study of One Thousand Five Hundred Cases of Sebaceous Diseases. By L. DUNCAN BULKLEY, A.M., M.D. Octavo, cloth $2 00

Eczema and its Management. A Practical Treatise Based on the Analysis of Three Thousand Cases of the Disease. By Same Author. Octavo, cloth $3 00

Manual of Diseases of the Skin. With an Analysis of Eight Thousand Cases, and a Formulary. By Same Author. Large 16mo, cloth, $1 25

Principles and Practice of Dermatology: A Theoretical and Practical Treatise on Diseases of the Skin. By Same Author. Octavo. (In Preparation.)

G. P. PUTNAM'S SONS,

NEW YORK AND LONDON

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

(*Cut this out and return it to G. P. Putnam's Sons.*)

G. P. PUTNAM'S SONS, 27 & 29 West 23d Street New York.

Enclosed find $.....for which please forward "THE MEDICAL ANALECTIC" for one year to the address below, together with

.....copy.....

.....copy.....

.....copy.....

in accordance with Special Premium List on the back of this page.

Address.....

.....

Date.....

ENGRAVING AND STATIONERY

A large number of people who reside at a distance from the principal cities, not understanding the facility and accuracy with which orders for Engraving and Stationery can be filled through the mails, are obliged to content themselves with a very inferior grade of Stationery and of Engraving and Printing, when, by sending their orders to head-quarters, they can have the same executed at moderate prices and in a thoroughly artistic manner. In the extensive Stationery Department of Messrs. G. P. PUTNAM'S SONS, Original Designs for Monograms, Crests, and Coats of Arms are furnished for stamping on note and letter paper. Visiting Cards, Wedding and Reception Invitations are engraved and printed in the correct style, while their exceptional facilities enable Messrs. PUTNAM to execute all such work at the lowest prices which are consistent with a high standard of excellence.

Their stock of Fine Writing Papers is extensive, and contains all the latest novelties, many of the same being specialties manufactured exclusively for their Retail Department. Messrs. PUTNAM are now conducting an extensive trade through the mails, and are in a position to supply the wants of their customers promptly, intelligently, and economically. They furnish estimates and samples for every description of engraving and printing.

G. P. PUTNAM'S SONS,

27 and 29 West 23d St., New York, 25 Henrietta St., Covent Garden, London.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

RECENT MEDICAL PUBLICATIONS

OF

G. P. PUTNAM'S SONS,

27 AND 29 WEST 23D ST., NEW YORK;

25 HENRIETTA ST., COVENT GARDEN, LONDON.

ALTHAUS. On Sclerosis of the Spinal Cord. Including Locomotor Ataxy, Spastic Spinal Paralysis, and Other System Diseases of the Spinal Cord; their Pathology, Symptoms, Diagnosis, and Treatment. By JULIUS ALTHAUS, M.D. With nine illustrations. 8vo, cloth $2 75

"We commend it as an admirable compendium of knowledge on its subject."—*Medical News*, Louisville.

ANSTIE. Neuralgia, and the Diseases which Resemble it. By FRANCIS E. ANSTIE, M.D. 16mo 1 25

BULKLEY. Acné and its Treatment. A Practical Treatise, Based on the Study of 1,500 Cases of Diseases of the Sebaceous Glands. By L. D. BULKLEY, M.D. 2 00

DOWSE. The Brain and the Nerves; their Ailments and their Exhaustion. By THOMAS STRETCH DOWSE, M.D. 8vo, cloth 1 50

"Is readable, instructive, and suggestive."—*Medical Review*, Chicago.

FRIEDLANDER. Technical Microscopy. For Use in Medical and Pathological Investigation. By Dr. CARL FRIEDLANDER, of Berlin. Translated by S. Y. HOWELL, M.D. (*In press*)

GARRATT. Myths in Medicine and Old-Time Doctors. By ALFRED C. GARRATT, M.D. 8vo, cloth 1 50

"The book is worthy of careful reading by both profession and laity."—*Lancet*, Detroit.

KITCHEN. Consumption: Its Nature, Causes, Prevention, and Cure. By J. M. W. KITCHEN, M.D. 16mo, cloth 1 25

"May be read with advantage both by physicians and laity."—*Independent*, N. Y.

KNAPP. Cocaine: Its Use in Ophthalmic and General Surgery. By Dr. H. KNAPP. and others. 8vo 75

"Is full of interesting cases; we cordially recommend it to the attention of our readers. It reflects great credit on the author."—*London Lancet.*

LEFFERTS. Pharmacopœia for the Treatment of Diseases of the Larynx, Pharynx, and Nasal Passages. With Remarks on the Selection of Remedies, Choice of Instruments, and Methods of Making Local Applications. By GEORGE M. LEFFERTS, M.D. 16mo, cloth 1 00

"What is recommended in this work can be accepted as having been thoroughly tested.—*Canadian Practitioner.*

MATTISON. The Treatment of Opium Addiction. By J. B. MATTISON, M.D. 8vo. cloth 50

"It is a clear, concise treatment which will interest the profession."—*Inter-Ocean*, Chicago.

MEYNERT. Psychiatry: a Clinical Treatise on Diseases of the Fore-Brain, Based upon a Study of its Structure, Functions, and Nutrition. By THEODORE MEYNERT, M.D., Professor of Nervous Diseases and Chief of the Psychiatrical Clinic in Vienna. Translated (under authority of the author) by B. SACHS, M.D. (*In press*)

PARKER. Cancer: Its Nature and Etiology. With Tables of 397 Illustrated Cases. By WILLARD PARKER, M.D. 8vo, cloth 1 50

SEMPLE. The Diseases of Children. A Hand-Book for Practitioners and Students. By ARMAND SEMPLE, M.D. Cloth 1 75

"The book is a very fair presentation of its subject * * * and trustworthy. It is clearly written and systematically arranged."—*Medical Record*, N. Y.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

LACTOPEPTINE,

The most important remedial agent ever presented to the Profession for Dyspepsia, Vomiting in Pregnancy, Cholera Infantum, Constipation, and all Diseases arising from Imperfect Nutrition.

LACTOPEPTINE precisely represents in composition the natural digestive juices of the Stomach, Pancreas, and Salivary Glands, and will, therefore, readily dissolve all foods necessary to the recuperation of the human organism.

CAUTION.

We regret that we are compelled to caution the profession in prescribing Lactopeptine, but very careful investigation has proven to us clearly the necessity of it.

Substitution of cheap and worthless compounds is being made in many cases where Lactopeptine is prescribed.

Lactopeptine is always UNIFORM, *and its effects are* SPECIFIC, *and no one has ever been able to imitate its digestive value. If you do not obtain positive results when you prescribe Lactopeptine, you can be sure that some substitution has been made, and in such cases it may be necessary for the physician to prescribe Lactopeptine in the original ounce package to insure certainty of obtaining the genuine article. We can confidently make this assertion, knowing the scrupulous uniformity in digestive value of every ounce of Lactopeptine.*

Lactopeptine has always been kept strictly in the hands of the Medical Profession, never having been admitted in any publications but Medical Journals. It is prescribed by the most intelligent and educated physicians in all parts of the world, and there are but few physicians who have ever used Lactopeptine that will not agree with the late Professor L. P. Yandell, when he says: "Lactopeptine is one of the certainties in medicine, and in this respect ranks with Quinine."

In the various forms of Dyspepsia, in Vomiting in Pregnancy, and in Mal-Nutrition of Children, there is no known remedy so positive in results.

The New York Pharmacal Association,

P. O. Box 1574 - - - - - NEW YORK.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

THE
MORGAN LUMINOUS SIGN CO.

AGENTS WANTED IN EVERY CITY, TOWN, AND VILLAGE.

Shine All Night Without the Aid of Artificial Light!

LUMINOUS DOCTORS' SIGNS A SPECIALTY.

ALL OUR LETTERING IS DONE BY SAND BLAST.

Luminous Door Plates, Luminous House Numbers, Luminous Street Names, Bell Plates, etc., etc.

Luminous Moulding for the Doors and Windows of Out-Buildings, Gates, Stiles, Posts, etc., etc.

RETAIL PRICE LIST.

SIGNS.

2½ in. x 12 in.	$5.00	10 in. x 12 in.	$10.00
2½ in. x 14 in.	5.50	6 in. x 25 in., name and office hours,	15.00
4 in. x 14 in.	6.00	10 in. x 12 in., " " "	15.00
4 in. x 20 in.	6.50	12 in. x 18 in., " " "	20.00

Larger sizes subject to correspondence.

DOOR PLATES.

BEST BEVELLED FRENCH PLATE GLASS.

4 in. x 6 in., square	$8.00	4 in. x 6 in., oval	$8.00
3 in. x 6 in. "	7.00	3 in. x 6 in., "	7.00

HOUSE NUMBERS.

BEST BEVELLED FRENCH PLATE GLASS.

3½ in. x 4 in., oval	$3.00	4 in. x 6 in., oval	$4.00

STREET NAMES.

IN ALL STYLES AND SIZES, SUBJECT TO CORRESPONDENCE.

SPECIAL NOTICE.—Particular attention is called to our **Luminous Moulding**, to go around doors, windows, etc., of all out-buildings. It shines clear and bright all night long, and will retain its luminosity for many years. Sold in two-foot strips, and can be put on by any one with a few brads or finishing nails. Price 40 cents per linear foot. Samples, 25 cents, by mail.

Agents wanted. Big commissions. Sells at sight. Secure territory at once.

Orders to receive attention must by accompanied by at least half the amount in cash. Balance C.O.D.

Postal Notes, Stamps, or Money not registered, INVARIABLY AT SENDER'S RISK. *Remittances in P. O. Money Orders preferred to all others.* All communications should be addressed, and all remittances should be made payable only, to

EDMUND S. MORGAN,

P. O. Box 164. **Keyport, N. J.**

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

P. Scherer & Co.,

11 Barclay Street, - - New York.

The largest importers of European Natural Mineral Waters beg to draw the attention of the Medical Profession to the advantages they offer through a direct and constant fresh supply. Amongst the large number prescribed are

FOREIGN WATERS.

Æsculap.
Aachener Aix la Chapelle.
Apollinaris.
Birmensdorfer.
Bilin.
Bonne.
Bourboule.
Carlsbader. (Four Springs: (Sprudel, Schloss, Theresian, and Muehlbrunnen.)
Carlsbad Natural Spring Salt.
Carlsbad Soap.
Carlsbad Pastilles.
Contrexeville.
Eger Franzensbrunnen.
Emser Kraenchen.
" Victoria.
" Pastilles.
Friederichshaller.
Gastein.
Gerolstein.
Giesshuebler Sauerbrunnen.
Giesshuebler Pastilles.
Haller Iodine.
Homburger Elisabeth.
Hunyadi János.
Mattoni's Hungarian.
Kronthaler.
Kissingen Rakoczy.
Kissinger Bitterwater.
Kreuznacher Mutterlauge Salt.
Kreuznach Elisabeth Water.
Kreuznach Mutterlauge.
Marienbader Kreuzbrunnen.
Obersalzbrunn.
Ofener Rakoczy.
Ofener Franz Joseph Spring.
Oreza.
Pullna Bitterwater.
Pyrmont Steelwater.
Rhenser Water.
Rippoldsauer.
Rossbach.
St. Galmier.
Schwalbacher Steelwater.
Selters.
Tannus Water.
Vals.
Vichy.
Wildungen Otto Spring.
" Halenen Spring.
Wilhelmsquelle.

AMERICAN WATERS.

Alleghany Spring.
Alum Rock Bridge.
Ballston Spa.
Bethesda (Specific for Kidney Diseases).
Blue Lick.
Buffalo Lithia.
Capon Spring.
Cayuga.
Champion Spring.
Columbian.
Congress.
Deep Rock.
Empire.
Excelsior.
Geyser.
Gettysburg.
Hathorn.
High Rock.
Massena Sulphur.
Missisquoi.
Oak Orchard.
Richfield Springs, Sulphur.
Saratoga Red Spring.
" Star Spring.
" Vichy.
Sharon Spring (Sulphur).
St. Catharine's (Concentrated).
South Poland.
White Sulphur, Greenbriar, Va.
Washington Spring, Saratoga.

We are at all times pleased to answer the Medical Profession relating to Mineral Waters.

In connection with our Mineral Water business, we are prepared to supply Pure Wines and Liquors for pharmaceutical and medical purposes from the most renowned houses in Europe. Please send for Price List.

We are importing direct from the following Houses:

HOEHL BROS., Geisenheim, Rhine Wines.
OTTO PRUMM, Mayence, Rhine Wines.
WOLFE & CO., Frankfort, Rhine Wines.
DUMEZIEL & JOLIVET, Bordeaux, Clarets.
TH. LAMARQUE & CO., Bordeaux, Clarets.
JOSE PEMARTIN, Xerez de la Frontera, Sherries.
WILLIAMS, ENGELBACH, & CO., Sherries.
R. SCHLUMBERGER, Vöslau, *Austrian Wines.*
WILSON & PARKER, Xeres de la Frontera, Sherries.
D. M. FEUERHEERD, Jr., & CO., Oporto, Ports.
CAMPBELL & CO., Oporto, Ports.
DUBOIS FRERES & CAGNION, Cognac Brandies.
GUNDLACH & CO., California Wines, Sherries, and Ports.

THE LARGEST SELECTION OF ANY HOUSE IN THE U. S.

☞ In corresponding with Advertisers, please be sure and mention The Medical Analectic.

SCOTT'S EMULSION

PURE COD LIVER OIL

WITH HYPOPHOSPHITES OF LIME AND SODA.

THE STANDARD EMULSION OF COD LIVER OIL.

Acknowledged by leading Physicians in the United States and other countries to be the most *elegant*, most *permanent*, and *palatable*, preparation in the market.

It is more easily administered, and can be tolerated longer by children and delicate stomachs than any other preparation.

Its ease of digestion and ready assimilation and its fat producing and strengthening qualities, makes it especially valuable in the various conditions in which the combination is indicated.

It is permanent. Hence it does not separate nor decompose like other preparations—and the dose is always the same.

But the thousands of unsolicited testimonials from Physicians throughout the world, and the practical experience of the last ten years, is the most conclusive proof of its high therapeutic value, and the brilliant results obtained by its use.

FORMULA:—50 Per Cent of Pure Cod Liver Oil, 6 grs. of the Hypophosphite of Lime, and 3 grs. of the Hypophosphite of Soda to a fluid ounce. Emulsified with mucilage and glycerine.

S. & B's BUCKTHORN CORDIAL, RHAMNUS FRANGULA.

Is giving universal satisfaction to the profession, for its mild but certain and efficient cathartic action. It seems to be *almost* a *specific* for *habitual constipation*, and we are constantly in receipt of the most flattering reports regarding it. The care we use in its preparation—having the bark always the proper age, and properly exhausted—makes it always reliable in its action. Be sure and specify S. & B's Buckthorn Cordial.

To those who have for any reason never yet tried these preparations, we will be pleased to send samples free by express.

SCOTT & BOWNE, M'f'g. Chemists, 132 & 134 South Fifth Ave., N. Y.

PHOSPHOPEPTINE

A Valuable and Efficient Nutrient Tonic.

PHOSPHOPEPTINE is the combination of the phosphates of the Cereals, with Pepsin and Pancreatine, forming one of the most valuable Nutrient Tonics ever offered to the medical profession.

For the treatment of Nervous Affections, Physical Prostrations, Impairment of Mental Activity, and in all cases of Malnutrition and Digestive Disorders. It will be found of great value in convalescence from Typhoid and other fevers, Pneumonia, Diphtheria, and other acute diseases. Also in Failing Appetite, and Debility of old age.

EACH FLUID OUNCE CONTAINS:

Phosphates (Combined)	10 Grains.
Pepsin	4 "
Pancreatine	2½ "

Elixir Phosphopeptine is the most elegant and agreeable preparation on the market. Prepared by

CHARLES A. HIGGINS, PHARMACEUTICAL CHEMIST,

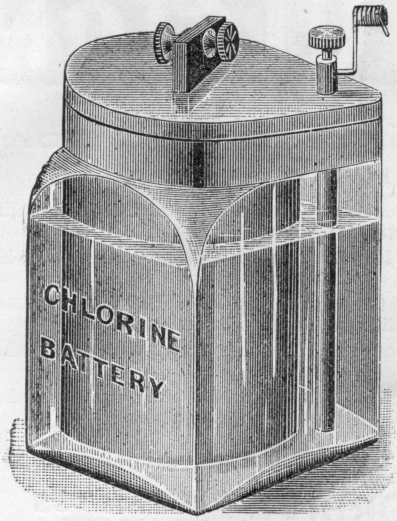
FLEMINGTON - - - - NEW JERSEY.

CIRCULARS AND SAMPLES SENT ON APPLICATION.

FOR SALE BY ALL DRUGGISTS. TRADE SUPPLIED BY

R. W. ROBINSON & SON, 186 Greenwich St., NEW YORK.

JOHNSTON, HOLLOWAY, & CO., 602 Arch Street, PHILA.



THE Chlorine Battery

Is offered to Physicians and Surgeons in the belief that it is better suited to their requirements, and possesses more desirable qualities than have ever been combined in any other, among which are the following:

FIRST.—It is cheap in first cost, and much cheaper in maintenance than any other.

SECOND.—It requires no cleaning and far less care than any other.

THIRD.—It uses no acids and has no fume or odor.

FOURTH.—It does not require to be taken apart or changed in any way when not in use.

FIFTH.—It can be replenished cheaply and easily when needed without taking it apart or moving it.

SIXTH.—It will not freeze, or be prevented from working by the lowest temperature known in this climate.

SEVENTH.—It is always ready for use.

Practical use for more than five years has proved that it possesses, to the fullest extent, all the merits claimed for it.

It is especially adapted to "cabinet" or "galvanic" use.

THE CHLORINE BATTERY FARADIC MACHINE

Or Electro-Medical Apparatus, is constructed partly upon the DuBois-Reymond principle, and in accordance with the latest developments in electrical science. It is contained in a neat portable box, and operated by one full-sized standard cell of **Chlorine Battery,** sealed air-tight. It gives the direct currents of adjustable strength, and every kind or quality of Faradic currents that it is possible for any Faradic machine to give. The only battery which will work for years without cleaning or renewing. Finely finished and nickel-plated.

CAUTION.

The materials used in the Chlorine Battery are covered by Patent No. 219,631, granted to me September 16, 1879. No other person is licensed or authorized in any way to make or sell this battery in the form designed for Physicians and Surgeons, or the materials used in it. Any claiming to be such are infringements. The many desirable qualities of the battery have induced others to imitate it by using other compounds of mercury, which are changed into the chlorides by use in the cell. All such are infringers, and will be prosecuted. My patent is the first of its kind recorded in the Patent Office.

I issue special licenses to purchasers, authorizing them to obtain the materials where they wish and use them without limit in cells purchased from me.

Respectfully,

D. H. FITCH,

P. O. Box 75. **Cazenovia, N. Y.**

WHAT THE PHYSICIANS SAY.

CAZENOVIA, N. Y., July 27, 1885.

A battery for the use of the medical profession has at last been found in the CHLORINE BATTERY manufactured by D. H. Fitch, of Cazenovia, N. Y.; one that is efficient, clean, durable, free from corrosive fumes, requires very little care, ready to operate at all times, reliable, and not expensive.

I have used one of his cells to operate my Faradic machine nearly every day for more than a year, and a cabinet battery of twenty-four cells of the same for galvanic use, for the past six months, and I can say from experience that it has no equal.

When the "circuit" is "closed" it works vigorously and is reliable. When "open" it is at rest and inert, and there is no waste of material, no removal of zincs, carbon, or solutions—in fact, no change at all is required except to "open" the "circuit" when not in use.—I. N. GOFF, M.D.

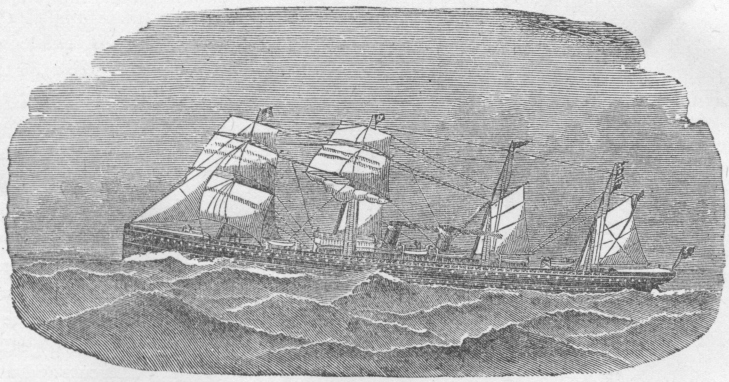
ST. JOSEPH, MO., July 20, 1885.

The Battery is very satisfactory, is working well and giving no trouble.—J. W. VANCE, M.D.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

GUION LINE

United States Mail Steamers.



BETWEEN NEW YORK AND LIVERPOOL.

(Sailing Tuesdays and Saturdays.)

Arizona, - 5500 Tons.	Alaska, - 6500 Tons.
Wyoming, 3716 "	Wisconsin, 3720 "
Nevada, - 3350 "	Abyssinia, 3376 "

These steamers are built of iron, in water-tight compartments, and are furnished with every requisite to make the passage across the Atlantic both safe and agreeable, having bath-room, smoking-room, drawing-room, piano, and library; also, experienced surgeon, stewardess, and caterer on each steamer. The state-rooms are all upper-deck, thus insuring those greatest of all luxuries at sea—perfect ventilation and light.

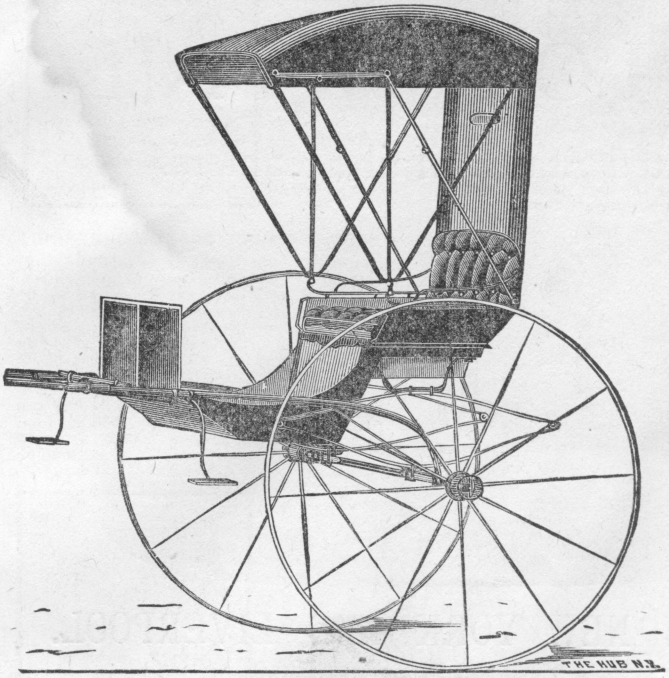
Cabin passage (according to state-room), $60, $80, and $100; intermediate, $40; steerage at low rates.

OFFICE, NO. 29 BROADWAY,

GUION & CO.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

PERFECTION AT LAST!



Probably more than any other class of persons, physicians appreciate and require a vehicle that presents the maximum of ease to both the passenger and the horse. You will not find these qualities attached to any vehicle in so great a degree as in the

YORKVILLE ROAD CART.

Many physicians in all parts of the country pronounce it perfect after many months of daily use in their practice.

Guaranteed absolutely free from horse motion.

For 32-page Catalogue, with cuts and testimonial letters from physicians and others, address the manufacturer,

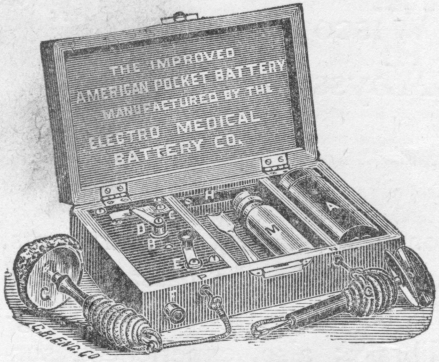
W. R. CHURCH,

Nos. 13 to 19 Ann Street. **Yorkville, Ill.**

THE IMPROVED AMERICAN POCKET BATTERY.

GIVES THE FARADIC AND PRIMARY CURRENTS.

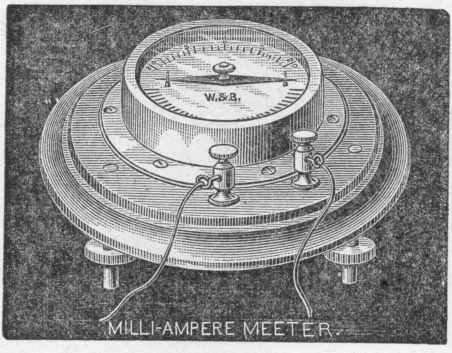
For Physicians and Family Use.



The design and arrangement of this Battery are entirely original (not copied). In convenience, portability, power, economy, and durability it has no equal. Our patents cover such parts as make it greatly superior to any POCKET BATTERY now in the market. It has marked improvements over them all in the patent hard-rubber screw-top revoluble cell (like a pocket inkstand), positively holding the mercury solution without leakage, and therefore can be *carried in the pocket fully charged.* Another feature of great merit are the heavy brass strips H on sides of the box connecting the cell with the induction coil—entirely doing away with the small wire connections found in all other machines on the bottom of the box, which corrode and rust by solutions leaking, and are so difficult and expensive to repair. We also furnish two Nickel-Plated Electrodes with hard-rubber handles for clamping sponge, chamois skin, etc., abolishing the inconvenient common tube electrode and wood handles in other batteries. Less mercury is consumed for a strong current than in any other instrument of the kind. The primary and secondary currents are changed simply by moving a switch. Full directions accompany each machine. Don't fail to examine this machine before buying.

Manufactured by the **Electro-Medical Battery Co.,** Kalamazoo, Mich.

Price, $10.00. ☞ Send for Circular A, giving special price for a sample Battery to Physicians prepaid. Every Battery fully warranted.



WAITE & BARTLETT,

Manufacturing Electricians.

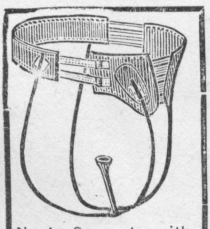
Galvanic, Faradic, and Office Cabinet Batteries of all kinds, at prices within reach of all. All kinds of Electrodes. The celebrated Piffard Galvano-Cautery Battery for surgical operations, and a ful line of Electrodes for operating in the cavities of the body; also Electric Lamps and Batteries, complete for examinations; Differential Calorimeter, for temperature diagnosis, as used by Prof. Hammond and Prof. A. L. Ranney of this city. Milli-Ampère Meter, for measuring the quantity of current used in electrical treatment. Static machines, improved Holtz pattern. All kinds of electrical work to order.

202, 204, & 206 East 23d Street,

Near Third Avenue Elevated R.R.

Twenty-third Street cars pass the door.

IMPROVED UTERINE SUPPORTER.



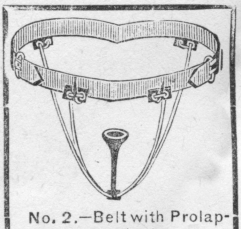
No. 1.—Supporter with Prolapsus Cup attached.
PRICE, $2.75

In calling the attention of physicians to these invaluable instruments, we have the pleasure of presenting such as are eminently calculated not only to relieve the sufferer but effect a radical cure.

No. 1. Is an Abdominal Supporter of the most approved form, fastened at the sides by elastic straps and buckles.

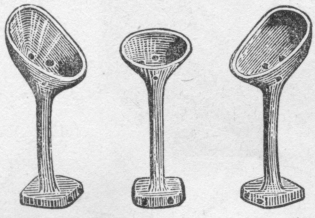
No. 2. Is a non-elastic Web-Belt, cut to conform to the shape of the body; also made to buckle at sides. It is light, cool, and comfortable to wearer in cases where the supporters are not a necessity.

No. 3. Is a similar belt with instrument attached, which is highly recommended, as its form can be altered by either widening or narrowing to meet any case where comfortable mechanical support is a desideratum.



No. 2.—Belt with Prolapsus Cup attached.
PRICE, $1.75.
$2.75 with No. 1 Supporter.

These instruments are made of Hard-Rubber, highly polished, non-irritant, will not corrode like metal, and can be curved or shaped as desired, by gently heating over a lighted lamp, or flame of gas, or by immersion in hot water, and will retain their shape when changed. They can be worn at all times without interfering with the necessities of nature. They have no equal for the purpose intended, having received on their merits the universal approval of the Medical Faculty throughout the country.



Retroversion. Prolapsus. Anteversion.

THESE PRICES TO PHYSICIANS ONLY

DIRECTIONS FOR ORDERING.

Give measure around the body 2 inches below hips, and state if for Prolapsus, Retroversion, or Anteversion. We make the Cups in three sizes, viz.: small, 1¼ inch; medium, 1½ inch; and large, 1¾ inch. In length from lower part of base to top of cup, 3½ inches. When a longer instrument is necessary we can furnish it. Price, Single Cup, $1.12. Rubber tubing, 25 cents per set. Cups can be exchanged and re-exchanged when desired.

No. 3.—Belt with Cutter's Anteversion Pessary attached.
PRICE, $2.00.
$3.00 with No. 1 Supporter.

Sent free by Registered Mail.

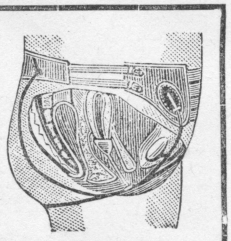
HASTINGS & GARSON,

MANUFACTURERS OF

Surgical Bandages,

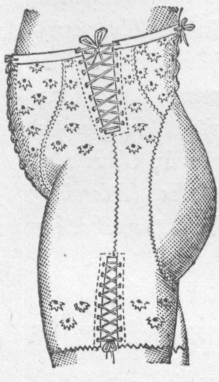
224 South Ninth Street,
PHILADELPHIA, Pa.

Remit by Express, Registered Letter, Post-office Order, Certified Check or Draft.



No. 4.—Showing the Supporter when applied for Retroversion.

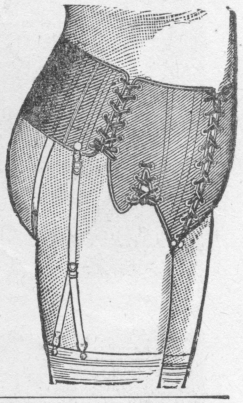
MADAME LA CHAPELLE'S "HEALTH PRESERVER."



A REVERSE CORSET for preventing and overcoming Uterine Disease. Pre-eminently useful during Pregnancy. Especially adapted to treatment of Functional Derangement. It affords IMMEDIATE SATISFACTION. Heat and pain throughout the region of the back and pelvis, "fulness and dragging down," prolapsed bowels, ovarian weakness, troubles of the Bladder and attendant reflex troubles of Heart, Brain, Stomach, and Liver are relieved by its application. Every one made to order, from glove kid and calf. In measuring give *exact* size (under all clothing) of waist, abdomen at umbilicus, hips (largest part), thigh, and length from waist to pubes. **Measurement must be accurate to ensure perfect fit.**

Retail Price, with Leggings, $15; to Physicians, $10.
Without Leggings, $12; to Physicians, $8.

SEND FOR CIRCULARS AND MEASURING CARDS.



WHITE, WILLIAMS & CO.,

257 Columbus Ave., Boston, Mass.

Indorsed by celebrated physicians. Used in public and private hospitals. Shown in medical colleges. ☞ "No doctor will fail to recommend or furnish them after knowing their value." ☜ **Unrivalled in treatment of Hernia. Superior to Truss.**

THE NEW YORK HOMŒOPATHIC MEDICAL COLLEGE.

This College offers a thorough and comprehensive course of medical education extending over a period of three years. Laboratory work in Chemistry, Urinary Analysis, Toxicology, Histology, etc., is given to junior students.

Its advanced courses are rich in clinical instruction in every department.

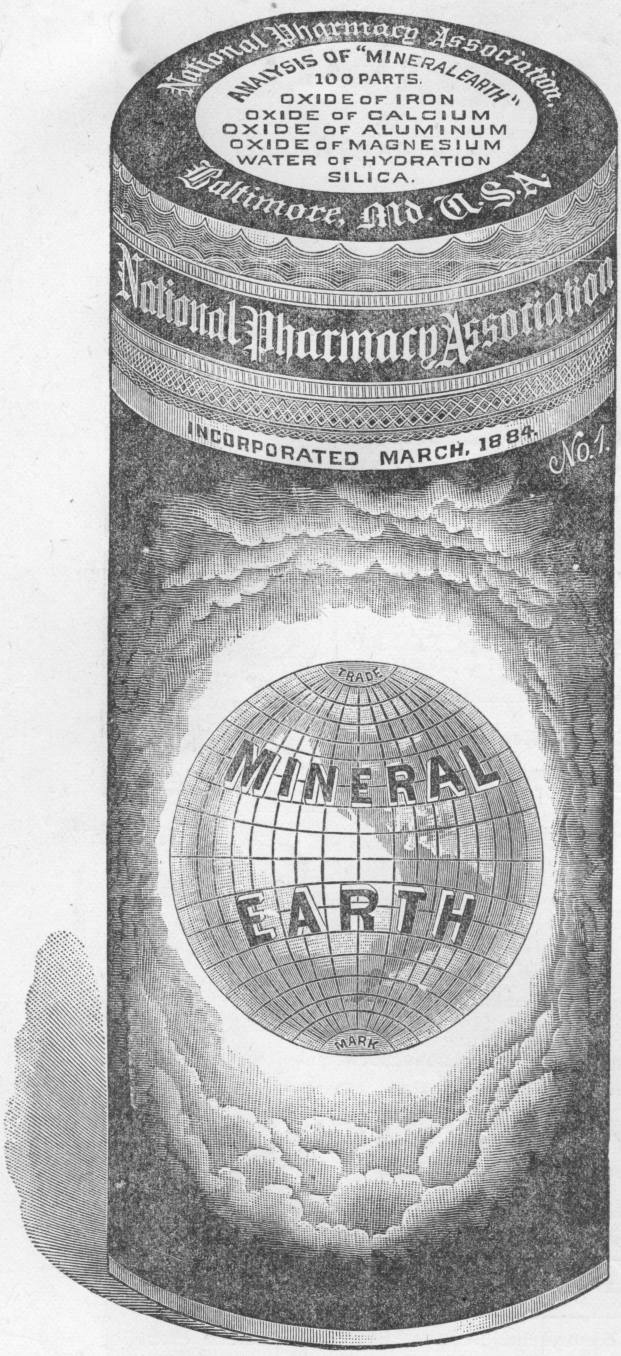
Physicians who desire an extended knowledge of **Homœopathic Therapeutics** can take a course in Pharmacology and Therapeutics, and witness the action of drugs prescribed according to the law of similars.

Fees for the graded course of three years, $200.

Post-graduate course (six months), $50.

For information address
Prof. E. V. MOFFAT, M.D. Secretary,
149 West 44th St.

T. F. ALLEN, A.M., M.D., Dean,
10 East 36th St. N. Y.



Full-Size No. 1 Package.

RECOMMENDED

For General Use.

AN OPEN LETTER.

"MINERAL EARTH"—prepared for physicians' use, by the National Pharmacy Association of Baltimore—is a combination of a number of pure Earths; it is a surgical dressing, uniform in its ingredients, free from organic matter and irritating substances, and possessing inorganic salts which exercise a healing, antiseptic, and disinfecting influence on diseased tissues.

* * * * * * *

Letters have been received from physicians endorsing "MINERAL EARTH" in the treatment of the following surgical conditions—in all of which they have found the Earth of marked benefit:—Chronic Ulcers, Cutaneous Diseases, Erysipelas, Inflammation of the Joints, Gun-Shot Wound of the Thigh, Gun-Shot Wound of the Hand, Severe Scald, Extensive Frost-Bites, Epithelioma, Senile Gangrene, Eczema, Varicose Veins, Urethritis, Vaginitis, Suppurative Wounds, Ulcerated Lesions in Syphilis, Bleeding Fungus of the Breast, and other conditions.

* * * * * * *

Mineral Earth can be had of the principal retail druggists, as follows:

No. 1. PACKAGES, TWENTY-FIVE CTS.
No. 2. GLASS JAR . . . FIFTY CTS.
No. 3. LARGE PACKAGE, ONE DOLLAR.

For pamphlet, sample, or further information, Address,

NATIONAL PHARMACY ASSOCIATION,
431, 433, 435 Hollins Street,
Baltimore, Md., U. S. A.

☞ In corresponding with Advertisers, please be sure and mention The Medical Analectic.

BEEF PEPTONOIDS!

THE ONLY PERFECT FOOD EVER PRODUCED!!

THE NUTRITIVE CONSTITUENTS OF BEEF AND MILK WITH GLUTEN.

Each Ounce of Powder represents 10 *ounces of Beef, Wheat, and Milk.*

1st.—**BEEF PEPTONOIDS,** as now prepared, is both *pleasant to the taste and smell.*

2d.—There is no food preparation that compares with it in nutritive properties.

3d.—It contains over 98 per cent. of nutritious matter.

4th.—One ounce of **BEEF PEPTONOIDS** contains more nourishment than five pints of beef tea prepared from eighty ounces of beef.

5th.—**BEEF PEPTONOIDS** is the only preparation, rich in nitrogenous matter, that is pleasant to the taste.

6th.—It has the advantage of being easily and quickly prepared for use.

BEEF PEPTONOIDS

Received the only GOLD MEDAL and Highest Award at the INTERNATIONAL HEALTH EXHIBITION, LONDON, 1884, after a critical examination of numerous food productions by a Jury composed of the best Chemists in Europe.

"*Beef Peptonoids* is by far the most nutritious and concentrated food I have ever met with. Indeed, a palatable and assimilable and in every way acceptable article of food, containing nearly seventy per cent. of purely nutritive nitrogenous material, has never before, to my knowledge, been offered to the Medical Profession or to the public."

PROF. JOHN ATTFIELD, *London.*

"*Beef Peptonoids* has an extremely high nutritive value. It is easily digested and is a valuable nutritive food for invalids and convalescents. Its odor and flavor surpass any preparation of meat ever examined by me. It merits my fullest endorsement."

DR. STUTZER, *Bonn, Germany,*
Director of the Imperial Chemical Laboratory for Rhenish Prussia.

'*Beef Peptonoids* is the most concentrated nitrogenous food I have ever examined. It is a *complete food,* consisting of 95 per cent. of assimilable solids of the most nutritious character."

PROF. C. R. TICHBORNE, *Dublin, Ireland,*
Professor of Chemistry Carmichael College of Medicine; Fellow of the Institute of Chemistry, President of the Pharmaceutical Society of Ireland, etc.

Price, in four-ounce packages, $1.00; also, for convenience and economy, we put up BEEF PEPTONOIDS in 16-oz. tins, which will be sent to any physician's address, post-paid, on receipt of $2.50. Sample mailed on application.

Thanking the profession for generous support in the past, we remain,

Very respectfully,

REED & CARNRICK,
182 Fulton St., New York.

In corresponding with Advertisers, please be sure and mention The Medical Analectic.

FELLOWS'

HYPO-PHOS-PHITES

(Syr : Hypophos : Comp : Fellows)

Contains **THE ESSENTIAL ELEMENTS** to the Animal Organization —Potash and Lime ;

The **OXYDIZING AGENTS**—Iron and Manganese ;

The **TONICS**—Quinine and Strychnine ;

And the **VITALIZING CONSTITUENT**—Phosphorus, combined in the form of a Syrup, with *slight alkaline reaction.*

IT DIFFERS IN EFFECT FROM ALL OTHERS, being pleasant to taste, acceptable to the stomach, and harmless under prolonged use.

IT HAS SUSTAINED A HIGH REPUTATION in America and England for efficiency in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs, and is employed also in various nervous and debilitating diseases with success.

ITS CURATIVE PROPERTIES are largely attributable to Stimulant, Tonic, and Nutritive qualities, whereby the various organic functions are recruited.

IN CASES where innervating constitutional treatment is applied, and tonic treatment is desirable, this preparation will be found to act with safety and satisfaction.

ITS ACTION IS PROMPT ; stimulating the appetite, and the digestion, it promotes assimilation, and enters directly into the circulation with the food products.

THE PRESCRIBED DOSE produces a feeling of buoyancy, removing depression or melancholy, and hence is of great value in the treatment of **mental and nervous affections.**

From its exerting a double tonic effect and influencing a healthy flow of the secretions, its use is indicated in a wide range of diseases.

Each Bottle of Fellows' Hypophosphites contains 128 Doses.

PREPARED BY JAMES I. FELLOWS, CHEMIST,

48 Vesey Street, New York.

CIRCULARS AND SAMPLES SENT TO PHYSICIANS ON APPLICATION.

☞**SPECIAL TO PHYSICIANS.**—**ONE** large bottle containing 15 oz. (which usually sells for $1.50) will be sent upon receipt of **Fifty Cents** with the application ; this will be applied to the prepayment of Expressage, and will afford an opportunity for a thorough test in Chronic cases of Debility and Nervousness. Express Charges prepaid upon all samples. For sale by all Druggists.